

Part C State Annual Performance Report (APR) for FFY 2007

Overview of the Annual Performance Report Development:

The Lead Agency for Part C in Michigan is the state education agency, the Michigan Department of Education (MDE). Since program inception, the early intervention system has coordinated and collaborated with the Departments of Human Services (DHS) - the child well-being agency, and Community Health (DCH), which houses both mental health and public health, to implement the early intervention system for infants and toddlers with disabilities or developmental delays.

The APR development process included input from partner agencies, data collected by various contractors, and a review by the Michigan Interagency Coordinating Council (MICC). Individual contractors are assigned responsibility for indicator-specific data. A series of meetings with partner agencies and contractors, both together and individually, were held to review and analyze data and develop appropriate activities. The data coordination meetings helped to align work and decrease redundancy of efforts.

Once the initial draft of the APR was completed, one staff member at MDE was assigned to coordinate the completion of the document. MDE staff, contractors, and staff from the North Central Regional Resource Center (NCRRC) and the Data Accountability Center (DAC) reviewed each indicator using the provided APR Checklist. An enhanced draft of the APR was shared with the MICC in November for input and discussion. Suggestions were reviewed and, where appropriate, integrated into the document.

In 2005, Michigan Part C engaged in activities to determine how to redesign the early intervention system to better support infants and toddlers with disabilities and their families. National technical assistance was contracted to support the state with this process. Lessons learned through the redesign process provide direction for system improvements that are described throughout the APR. Michigan learned that:

- 1) A significant portion of the cost of the system is supported by Michigan Special Education state and local funds;
- 2) Michigan Part C/*Early On*[®] needed a more comprehensive and flexible data system;
- 3) The interagency agreement/contract needs to delineate roles and responsibilities of each partner agency; and
- 4) Coordination of early intervention resources requires the support of interagency administration.

Michigan is a birth mandate state; eligible children are entitled to special education services from birth to 26 years of age. During the redesign process it was learned that state and local special education funds provide over \$40 million annually to the early intervention system. Given the significant role Michigan Special Education plays in *Early On*, a more enhanced relationship with local special education systems has occurred. MDE staff participates in a monthly conference call with special education directors. In addition, MDE staff, representing both the Part C system and special education system meets monthly to discuss system issues.

The need for a more flexible and comprehensive data system became more apparent with time. The Michigan Part C data system was originally built to respond to the point-in-time 618 data collection requirements. Refinements to the general supervision system and the State Performance Plan (SPP) requirements increased the need for additional data. *Early On* migrated to a web-based data system in December 2008, which includes additional data fields to collect SPP information. This will decrease the need for site-based file reviews to gather data to address SPP requirements and to make and verify correction of findings of noncompliance. Adding fields to a web-based data collection system is approximately a three year process. One year is required to program and pilot the changes. Another year is needed to train staff and provide technical assistance to get valid and reliable data. Finally, in the third year, data will be available for reporting. Michigan's upgraded data collection system will collect all data needed for completing the APR, except for family outcomes and the due process information.

Interagency coordination and collaboration has been a philosophy of the state of Michigan for many years. During the redesign process, the changing roles and responsibilities of the partner agencies became evident. It was decided to redesign the management structure and to complete a new interagency agreement with agency roles and responsibilities more delineated and specific.

It has also become clear that Michigan's system of general supervision must be refined and the relevant timelines aligned. In Michigan, Parts B and C have been involved in the development of a more comprehensive monitoring system, CIMS-2. The monitoring system has gone through various iterations to respond to the changes mandated as a result of the 2004 Reauthorization of the Individuals with Disabilities Education Improvement Act. There are three components to CIMS-2: (1) Focused Monitoring; (2) Data Analysis, which includes a process for notifying local early intervention programs of findings and requires corrective action plans for compliance indicators and improvement plans for results indicators; and (3) Verification. The focused monitoring component of CIMS-2 has been implemented and the data analysis portion of CIMS-2 will begin April 2009. Over the next federal fiscal year the verification process will be defined with support from NCRRC. The NCRRC will also assist Michigan to streamline the timelines and processes for identifying and correcting findings of noncompliance in a more efficient and effective manner. Guidance from OSEP and national technical assistance agencies will help Michigan Part C to articulate its general supervision system.

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
FFY 2007	100%

Actual Target Data for FFY 2007: 90.88%

Michigan has defined timely services as the provision of services within 30 calendar days from when a parent/guardian consents to the provision of early intervention services. During FFY 2007, **90.88%** of infants and toddlers with IFSPs had all the early intervention services on their IFSPs initiated within 30 calendar days of parent consent to the services. The improvement in this indicator may be attributed to technical assistance to local early intervention programs on what must be in a child's file to verify that services began within 30 days of parent consent. In addition, tracking exceptional family circumstances has helped Michigan progress towards compliance in this indicator.

Number of records reviewed from 57 local early intervention programs: 915 (includes 47 records with exceptional family circumstances)

Number of children who had all early intervention services delivered within 30 days: 780

Number of children with exceptional family circumstances: 47 (780 + 47 = 827 divided by 910 = .9088 X 100 = 90.88%)

Data source: Self Assessment for Cohorts 1 and 2, Service Provider Self Review (SPSR) for Cohort 3. Data collected from all local early intervention programs.

The increase in performance rate in FFY 2007 as compared to FFY 2006 (47.8%) may be attributed to a number of factors. Michigan's comprehensive system of personnel development held several trainings to ensure that local early intervention programs understood the requirements of Indicator 1. In particular, how to document exceptional family circumstances and ways to document when services actually began. In addition, the state revised its requirement for identifying findings. The state also revised its required response to findings for each local early intervention program. Based on this new approach, each local early intervention program was required to submit, for approval, an improvement plan that detailed strategies that the local early intervention program were required to implement in order to correct noncompliance, as soon as possible, but no later than one year from notification of the finding, including verification by the state.

As part of the improvement planning process, local early intervention programs are required to conduct file reviews as part of the quarterly reporting process. In addition, starting in FFY 2008, the term *improvement plan* was changed to *corrective action plan* to emphasize the importance of timely correction. When data from quarterly reports indicated correction of noncompliance had been met, MDE required early intervention programs to submit files to the Lead Agency for verification of correction of noncompliance. This required the local early intervention programs to submit files to the Lead Agency who uses a checklist, based on federal requirements, to verify correction of noncompliance. Local early intervention programs are notified of the verification of correction of noncompliance through a formal letter closing the corrective action plan. For those local early intervention programs who do not meet their interim targets and compliance, sanctions will be enforced which may include being focused monitored, a compliance agreement, or intensive state supervision.

During FFY 2007, Michigan was in the process of updating the Michigan Part C data system to include the collection of data regarding providing services in a timely manner; details of Michigan's progress with the upgrades are provided in the discussion of the planned improvement activities in this indicator. In order to collect data for this indicator, two-thirds of the state submitted data in a self assessment using the Michigan Electronic Grants System (MEGS). The other one-third of the state submitted data through the Service Provider Self Review (SPSR). SPSR is part of the Continuous Improvement Monitoring system (CIMS).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:**Michigan Part C FFY 2006 SPP/APR Response, regarding clarification of FFY 2005 data****Findings in 2005**

In FFY 2005, nine local early intervention programs were issued findings for Indicator 1, of those nine findings, six of those local early intervention programs verified correction of noncompliance by September 2008. Local early intervention programs that had not yet verified correction of noncompliance were required to update/revise their corrective action plans and turn in progress reports monthly. MDE included required specific interim targets that each local early intervention program had to reach by specific timeframes. These three local early intervention programs participated in a technical assistance call in October of 2008. To verify correction of noncompliance, MDE will require the local early intervention programs to submit files and MDE will verify correction of noncompliance by using the checklist based upon federal requirements. Each local early intervention program, for whom correction had been verified, will receive a letter closing the finding because compliance had been attained. Local early intervention programs who did not correct noncompliance were focused monitored. The focused monitoring visit allows the state to determine root causes and helps the local early intervention programs to develop and/or implement strategies to correct noncompliance.

As a part of the general supervision system, local early intervention programs that have not yet corrected noncompliance will be required to update/revise their corrective action plans and turn in progress reports monthly. MDE will state specific interim targets that each local early intervention program must reach by specific timeframes. To verify compliance, MDE will require the local early intervention programs to

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submit files and MDE will verify correction of noncompliance by using a checklist. Each local early intervention program will receive a letter, closing the finding when compliance has been attained. Local early intervention programs who have not met their interim targets and compliance may be focused monitored, have a compliance agreement, required to designate funds to assist in the compliance area, or receive intensive state supervision.

None (0) of the remaining three findings were corrected by January 2009.

Findings of noncompliance from FFY 2006 and the correction rate of those findings are reported in Indicator 9 of the FFY 2007 APR; details regarding findings of noncompliance with timely services are provided here.

Findings in 2006

Of 57 local early intervention programs monitored for compliance with the timely provision of services in FFY 2006, 11 were found to be out of compliance. Eight of these sites were able to provide documentation of compliance within one year. The remaining three local early intervention programs were able to show progress.

All findings were corrected by January 2009.

Progress/Slippage

Although Michigan did not meet the target of 100% compliance with this indicator, significant improvement from FFY 2006 was made from 47.8% to 90.88%. Through self assessment and SPSR, details on exceptional family circumstances were recorded and included in the FFY 2007 calculation. Of the 127 children who did not receive the services on their IFSP in a timely manner, 47 had exceptional family circumstances documented in the file. They included requests from parents to wait on services, hospitalization of children, and parents not home.

The increase in correction rate may be attributed to the state's approach to identifying findings and steps that each local early intervention program had to complete. Each local early intervention program had to submit, for approval, an improvement plan that detailed strategies that the local early intervention program was to take to correct noncompliance, as soon as possible, but no later than one year from notification of the finding, including verification by the state. As part of the improvement planning process, quarterly reports were submitted. Quarterly reports required the local early intervention program to conduct file reviews. When quarterly reports indicated compliance or that a state target had been met, MDE required early intervention programs to submit files to the Lead Agency for verification of correction of noncompliance. A sample of records was sent to MDE and MDE used a checklist to verify correction of noncompliance. Local early intervention programs are notified of the outcome of verification of correction of noncompliance through a formal letter. Starting in April 2009, CIMS-2 electronic system will direct the local early intervention program to pull randomly selected files for verification. In addition, the collection of exceptional family circumstances helps compliance with this indicator. Another reason for the progress in this indicator is the training and technical assistance provided by the state and the training entity.

Improvement Activities:

The following activities were included in the FFY 2006 APR and in the SPP that was updated in February 2007. An update on the progress of each activity is included.

Improvement Activities	Timelines	Resources
Activity: The Michigan Part C data system will be upgraded to ensure timely and accurate collection of utilization, outcome, and cost data for <i>Early On</i> .	2006 - 2008	Part C Administrative Structure Michigan Part C data system contractor

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<p>Discussion: The Michigan Part C data system upgrades moved forward during the reporting period and continue at the time of this report; as of December 2007 half of the 57 local early intervention programs have moved to the upgraded system. Additional local early intervention programs will be switched to the upgraded system beginning in spring 2008 with all local early intervention programs on the new system for the December 1, 2008 618 count. Updates to the Michigan Part C data system were made to include actual start date of each new service listed on the initial and subsequent IFSPs. In addition, the system also collects data related to exceptional family circumstances. This will allow Michigan to notify local early intervention programs of findings in a more timely manner, report data from all 57 local early intervention programs for this indicator in the FFY 2008 APR, better analyze reasons for noncompliance, and provide additional data about the local early intervention programs.</p> <p>For the FFY 2007 APR, to be submitted in February 2009, data for this indicator will be collected through the Service Provider Self Review (SPSR). One cohort of 19 local early intervention programs will complete and submit the SPSR, including child record review results, in spring 2008. The remaining two-thirds of the state will submit data in a local self assessment. In December 2008, all local early intervention programs will be moved over to the upgraded system.</p> <p>The process of upgrading the Michigan Part C data system has been time and resource consuming at the state and local level. Adding fields to a web-based data collection system is approximately a three year process. One year is required to program and pilot the changes. Another year is needed to train staff and provide technical assistance to get valid and reliable data. Finally, in the third year, data will be available for reporting. Michigan expects to use data from the new system for the FFY 2009 APR, submitted in 2011.</p>		
Activity: Develop policies and procedures regarding the state's definition around the 30-day definition of timely services.	Completed	MDE
<p>Discussion: Prior to FFY 2006, the term 'timely services' had not been defined for Part C in Michigan. Therefore, local early intervention programs were not necessarily initiating services within 30 days of receiving parental consent or documenting service initiation that did occur within 30 days. A draft Timely Services Reference Bulletin was distributed in December 2006 explaining the new requirements. The proposed policy change went out for formal public comment in October 2007. The final policy was enacted in summer 2008.</p> <p>The Timely Services Reference Bulletin also includes information regarding exceptional family circumstances. Personnel have been informed that an exceptional family circumstance must be family driven and documented in the child's record. With proper documentation and data entry, reviewers will be able to verify whether the delay in initiation of services was family driven and thus, justifiable.</p>		
Activity: Provide trainings to the field around exceptional circumstances, timely services and correct documentation for both.	Throughout 2007 Ongoing	CSPD contractor
<p>Discussion: The CSPD contractor continues to provide guidance to the field around the provision and documentation of timely services and exceptional family circumstances. The new tiered system of CSPD was implemented in 2007 with local early intervention programs receiving determinations of Needs Assistance being targeted by the CSPD contractor, and local early intervention programs receiving determinations of Needs Intervention targeted by MDE consultants. In 2008, local early intervention programs who received a Needs Assistance were required to contact the CSPD contractor. Local early intervention programs who received a Needs Assistance 2 were required to specify, with a justification and measurable results, specific technical assistance that they utilized. Local early intervention programs that received a Needs Intervention will seek technical assistance from the state.</p>		
Activity: Develop request for proposals for training and technical assistance and child find, and public awareness contracts.	Completed	Interagency staff
Activity: Award training and technical assistance and child find and public awareness contracts.	Completed	MDE
<p>Discussion: The Requests for Proposal for training and technical assistance and child find and public awareness were developed and awarded in October of 2007. The revised systems began October 1, 2007. The previous CSPD contractor was again awarded both the training and technical assistance and the child find and public awareness contracts with changes made based on <i>Early On</i> Redesign, funding decreases, the SPP, and system needs.</p>		
Activity: Recommendations from the <i>Early On</i> Redesign will be incorporated into the SPP.	Completed	<i>Early On</i> Redesign staff Local early intervention programs CSPD contractor
<p>Discussion: Improvement activities identified through the Redesign process have been incorporated throughout the SPP and APR.</p>		

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Activity: Analyze data measuring this indicator and develop additional improvement activities.	Ongoing with annual review through 2010	Interagency staff Part C contractors MICC Stakeholders
Discussion: As evidenced in the APR, analysis of data from multiple sources related to the SPP indicators helped Michigan identify issues within the field that need additional guidance or dialogue and to plan opportunities related to the indicators and Michigan's system of general supervision in order to correct noncompliance.		
Activity: Update and redistribute the Reference Bulletin regarding the definition of 'central file' and what documents are required to be a part of that file.	Fall 2008 Completed	MDE staff CSPD contractor Michigan Part C data system contractor
Discussion: The analysis of available data demonstrates the need for clarification to the field on exactly what is required to be included in each child's central file. The requirement to keep documentation of services provided and any exceptional family circumstances in the central file will positively impact compliance with this indicator.		
Activity: Refine and clearly define the Part C general supervision system.	Summer 2008 Completed	MDE staff (ECE&FS and OSE/EIS) CIMS contractor NCRRC DAC
Discussion: As described in the Overview of the APR, Michigan is working with national TTA experts to streamline its system of general supervision to more promptly and efficiently identify and correct findings of noncompliance. In August 2008, NCRRC and DAC visited Michigan to develop a paper regarding Michigan's Part C General Supervision system. Michigan presented at a conference for early intervention coordinators in Michigan in October explaining Michigan's General Supervision system.		
Activity: Require each of the 57 local early intervention programs to utilize the Michigan State Prototype IFSP, IFSP/IEP, Transition, Consent to Evaluate, and Authorization to Share forms or submit the locally-developed form(s) for state approval.	Summer 2008 Completed	MDE staff Interagency staff CSPD contractor Michigan Part C data system contractor
Discussion: Requiring local early intervention programs to use state prototype or approved forms will ensure that the required fields are available on every form, making it more likely that all necessary information will be available, and will ease the transition for families moving within the state. Local early intervention programs were required in the July 2008 application to specify whether they would use the state prototype or locally developed forms. If the local early intervention program indicated they would be using their own forms, MDE used a checklist to ensure that all components that were required were present. Notification to the local early intervention program occurred after MDE's check.		
Activity: Increase communication with ISD Special Education Directors through monthly conference calls, a planned stakeholder group, and attendance at their quarterly meetings.	Ongoing	MDE staff (ECE&FS and OSE/EIS) CIMS contractor
Discussion: Most local <i>Early On</i> coordinators are supervised by the ISD Special Education Director. Additionally, Michigan Special Education, birth to three years, is the largest provider of services to children enrolled in Part C. Therefore it is vitally important that the ISD Special Education Directors understand the Part C requirements and are involved in decision-making as stakeholders. Increased communication with ISD Special Education Directors will both improve their understanding of Part C regulations and policies and increase MDE staff members' understanding of the interrelationship between Part C and Michigan Special Education.		
Activity: Develop guidance on determining which services are <i>Early On</i> services versus which are 'other' services.	Winter 2008	MDE staff Interagency staff NCRRC NECTAC
Discussion: In Michigan, services available to children birth to three years whether enrolled in Part C or not, through state or local partners are not considered Part C services when the partners refuse to meet Part C regulations. Because best practice dictates that these services be coordinated through Part C, they are included on the IFSP as 'other' services. Record reviews, focused monitoring visits, and personal discussions have revealed that there are varying interpretations across the state about what is an <i>Early On</i> service versus what is an 'other' service. Clarifying this confusion will help ensure the correct completion of IFSPs and the collection of data on <i>Early On</i> services.		

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**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines /
Resources for FFY 2007**

No revisions at this time.

Part C State Annual Performance Report (APR) for FFY 2007

Overview of the Annual Performance Report Development:

See Indicator #1 (page 1).

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator 2: Percentage of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.

Measurement:

Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2007	90%

Actual Target Data for FFY 2007: 92.41%

Ninety-two point forty-one percent (**92.41%**) of infants and toddlers with IFSPs primarily receive early intervention services in the home or programs for typically developing children.

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children = 8,675

Total number of infants and toddlers with IFSPs = 9,388

8,675 divided by 9,388 = 0.9241 X 100 = 92.41%

Data source: Michigan Part C Data System, December 2007 collection

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

	12/1/02	12/1/03	12/1/04	12/1/05	12/1/06	12/1/07
% of infants and toddlers who primarily receive early intervention services in the home or programs for typically developing children.	76.82%	77.46%	84.41%	84.2%	88.1%	92.41%

Data source: Michigan Part C Data System, December 2007 collection

Michigan Part C FFY 2006 SPP/APR Response Table

The state was asked to explain data from 34 files that did not identify service location as 34 CFR 303.344(d)(1) requires, in part, that IFSPs list the location of the services and a justification for any of those services that are not provided in the home or community-based settings. The 34 files were from four service areas that were cited findings in 2005 for not meeting a related requirement of not providing an individualized justification when not serving a child in the home or community-based setting. Findings,

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with regards to a related requirement of justification have been verified and correction of noncompliance has been made.

FFY 2006 Findings

Of the four local early intervention programs which had findings related to the percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings, all corrected within one year.

Improvement Activities:

Michigan made progress and exceeded its target of 90%. The following activities will occur to ensure at least 90% of infants and toddlers in Michigan receive services in the home or programs for typically developing children. An update on the progress of each activity is included.

Improvement Activity	Timelines	Resources
Activity: Focused Monitoring Follow Up	Ongoing	MDE
Discussion: Four service areas received focused monitoring and a report from MDE stating areas of concern. At the follow up visit, each service area had met or exceeded its target. All service areas that had a finding in this area have been corrected.		
Activity: The Michigan Part C data system will be upgraded to ensure timely and accurate collection of utilization, outcome, and cost data for <i>Early On</i> .	2006 – 2008	Part C Administrative Structure Michigan Part C data system contractor
Discussion: The Michigan Part C data system upgrades moved forward during the reporting period and continue at the time of this report; as of the December 1, 2008 618 count, all 57 service areas have moved over to the upgraded system. Updates to the Michigan Part C data system have been made to include actual start date of each new service listed on the initial and subsequent IFSPs. Coding has been added for natural environments data to allow service areas to identify if services were provided in the home, community setting or other. In addition, the system also collects data related to exceptional family circumstances. This will allow Michigan to notify service areas of findings in a more timely manner, report data from all 57 service areas for this indicator in the FFY 2008 APR, better analyze reasons for non-compliance, and provide additional data about the local service areas. For the FFY 2007 APR, to be submitted in February 2009, data for this indicator has been collected through the Michigan Part C Data System. The process of upgrading the Michigan Part C data system has been time and resource consuming at the state and local level. Adding fields to a web-based data collection system is approximately a three year process. One year is required to program and pilot the changes. Another year is needed to train staff and provide technical assistance to get valid and reliable data. Data will be available for reporting in FFY 2009 APR.		
Activity: Training and Technical Assistance on the provision of natural environments will be continued by the CSPD contractor to incorporate elements from the <i>Implementation Guide to Natural Environments</i> into their trainings. Its effectiveness will be measured through pre- and post-tests for training participants through the CSPD system. Amendments to the training will be made based on results achieved.	Ongoing	CSPD contractor Michigan Part C data system contractor Interagency staff
Discussion: The CSPD contractor continued to provide training and technical assistance on the provision of services in the natural environment, especially to low-performing service areas. The contractor shared the Implementation Guide with service areas and it can also be found on their website.		
Activity: The data dictionary continues to be revised and training will occur.	Ongoing	Michigan Part C data system contractor Interagency staff
Discussion: The data dictionary is updated on a regular basis. The Michigan Part C data system has been aligned with OSEP 618 requirements and is being upgraded to meet SPP data needs.		

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Activity: Training will occur around the common definition of services provided in the natural environment, documentation, and how to report it through data collection.	Ongoing	CSPD contractor
Discussion: The CSPD contractor continued to provide training and technical assistance on the provision of services in the natural environment, especially to low-performing service areas. Additionally, the contractor developed a training and technical assistance module specifically targeted to this indicator and its related requirements.		
Activity: Develop request for proposals for training, technical assistance, child find, and public awareness contracts.	Completed	Interagency staff
Activity: Award training and technical assistance, child find, and public awareness contracts.	Completed	MDE
Discussion: The Requests for Proposal for training and technical assistance and child find and public awareness were developed and awarded during the reporting period. The revised systems began October 1, 2007. The previous CSPD contractor was again awarded both the training and technical assistance and the child find and public awareness contracts with changes made based on <i>Early On</i> Redesign, funding decreases, the SPP, and system needs.		
Activity: Analyze data measuring this indicator and develop additional improvement activities.	Ongoing with annual review through 2010	Interagency staff Part C contractors MICC Stakeholders
Discussion: As evidenced in the APR, analysis of data from multiple sources related to the SPP indicators has led to the development of additional, more targeted, improvement activities.		
Activity: Require each of the 57 local service areas to utilize the Michigan State Prototype IFSP, IFSP/IEP, Transition, Consent to Evaluate, and Authorization to Share forms or submit the locally-developed form(s) for state approval.	Summer 2008 Completed	CSPD contractor MDE staff
Discussion: The 57 local early intervention programs were required to either use the Michigan state prototype forms or submit their locally-developed forms. Having the local early intervention programs use the prototype forms or their approved forms, ensures that all required components are present, including a justification of services are not provided in the natural environment.		
Activity: Increase communication with ISD Special Education Directors through monthly conference calls, a planned stakeholder group, and attendance at their quarterly meetings.	Ongoing	MDE staff (ECE&FS and OSE/EIS) ISD Special Education Directors <i>Early On</i> local coordinators
Discussion: Staff participate in the monthly Special Education Directors calls. This ensures that any questions or updates are being received at the Special Education Director level.		
Activity: Require service areas not meeting compliance or performance targets to contact and accept guidance from Michigan's training and technical assistance providers.	Ongoing	CSPD contractor
Discussion: As part of findings and determinations, those service areas who are not substantially in compliance, and thus receiving a finding and a Needs Assistance or Needs Intervention, must work with Michigan's technical assistance providers. Michigan's technical assistance providers assist the local early intervention programs to create an improvement plan and therefore increase compliance.		
Activity: The CSPD contractor will review the new training and technical assistance module on natural environments to ensure that all related requirements are included in the training.	Completed	CSPD contractor Grant manager
Discussion: Michigan's personnel development system has reviewed and made changes to the natural environments module to include more in-depth training on when and why services are not held in the natural environment.		

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Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

The following activities, along with timelines and resources, have been developed to positively impact Michigan's compliance with the natural environment requirements. They have also been added to the SPP which can be viewed at www.michigan.gov/earlyon.

Improvement Activity	Timelines	Resources
Activity: Continuous Improvement Monitoring (CIMS-2)		CIMS contractor MDE
Discussion: CIMS-2 is being updated to better align with the APR. CIMS-2 will become a data analysis tool which will allow early intervention programs to analyze causes for not meeting state targets.		

Overview of the State Performance Plan Development

Refer to FFY 2007 APR page 1.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
 - B. Acquisition and use of knowledge and skills (including early language/communication); and
 - C. Use of appropriate behaviors to meet their needs.
- (20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

A. Positive social-emotional skills (including social relationships):

- a. Percent of infants and toddlers who did not improve functioning = $\left[\frac{\text{\# of infants and toddlers who did not improve functioning}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):

- a. Percent of infants and toddlers who did not improve functioning = $\left[\frac{\text{\# of infants and toddlers who did not improve functioning}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.

- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

C. Use of appropriate behaviors to meet their needs:

- a. Percent of infants and toddlers who did not improve functioning = $\left[\frac{\text{(\# of infants and toddlers who did not improve functioning)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

Overview of Issue/Description of System or Process:

The state has made considerable progress in developing its outcome measurement system over the past year:

1. Data Collection Procedures

- Review of Assessment Tools. Two committees were convened to examine assessment/measurement tools. Each committee included stakeholders from across Michigan's Part C system, *Early On*. One committee met as a part of the *Early On* Redesign Eligibility Determination Task Force and recommended tools appropriate for: (1) eligibility determination; (2) needs assessment/IFSP development; and (3) ongoing assessment/child outcomes measurement. A second committee was convened to evaluate potential tools to accurately and appropriately measure children's social-emotional status. The recommendations of both committees were incorporated into a list of tools provided to local service areas.
- Development of a Procedures Handbook. A policy and procedures handbook was developed to clarify all aspects of data collection in reporting on child outcomes measurements. The handbook incorporates information about a ratings tool and process, appropriate measurement tools, other data sources, frequency of data collection, the population of children to be included, and timelines for measuring child outcomes. Typical measurement tools used across the state include: Assessment, Evaluation, and Programming System for Infants and Children (AEPS), Battelle

Developmental Inventory, Bayley Scales of Infant Development, III, Early Intervention Developmental Profile (EIDP), Early Learning Accomplishment Profile (E-LAP), Hawaii Early Learning Profiles (HELP), The Carolina Curriculum for Infants and Toddlers with Special Needs, Brigance Diagnostic Inventory of Early Development, Infant and Toddler Developmental Assessment (IDA), and the Devereux Early Childhood Assessment for Infants and Toddlers (DECA-I/T).

- Adoption of a Rating Tool. A child outcomes rating tool, called the Child Outcome Summary Form (COSF), was developed; it is patterned closely on the ECO Center Child Outcomes Summary Form and also defines 'comparable to same age peers' as a child who has been scored a 6 or 7 on the COSF. As the data sources/assessment tools will vary across Michigan's 57 local service areas, this tool is being used to summarize data for each child. It captures both entry and progress data. Service providers can use the tool to capture data from many sources, including the child's assessment, observations, and parent input. Data collection will typically occur during the child's IFSP development meetings, and during the transition process. The data is then entered on the COSF website. The COSF aligns closely with the form used by 619 to collect outcomes data.

2. Training/Supporting Service Areas

- A Training and Technical Assistance program was developed to address the child outcomes data collection process. The Qualitative Compliance Information Project (QCIP) provided a component of the training to address the use of the Child Outcome Summary Form and web-based data entry procedures. The training closely reflected the content of the Child Outcomes Handbook. Michigan's CSPD contractor also provided a training component discussing best practices for including parents (and other individuals chosen by the parent) in the process. Both components were provided in collaboration with state interagency staff to create shared responsibility, knowledge, and coordination across all levels of the system.

3. Sampling Plan – Phase In

- Data collection is proceeding according to the sampling plan previously submitted to OSEP. Cohort 1, which includes a representative sample of one-third of the 57 local service areas, began collecting entry data on all children enrolled in *Early On* as of July 1, 2006 and exit data for any child exiting *Early On* who has been receiving services continuously for six months. Cohort 2 began collecting entry data on all children enrolled as of July 1, 2007 and exit data for any child who has been receiving services continuously for six months. Cohort 3 began data collection on July 1, 2008.

4. Data Collection and Management and Data Quality Assurance

- All data from the child outcomes rating tool is entered into a web-based data entry system, with a copy of the rating tool retained in the child's central record. Completed upgrades to the data system include adding the following variables:
 - Date summary form completed
 - Timeframe for which the data were collected (Entry, Exit, Exceptional Circumstance)
 - 1-7 point rating for each of the three child outcomes
 - Assessment of progress (for Exit)
- Data Auditing. The online COSF data are regularly audited, including names, dates, and impossible progress ratings. COSF rating dates are compared to IFSP signature dates to ensure that all children were entered during the required time period and exited after participating in Part C for a minimum of six months. In order to eliminate and reduce error, the web-based COSF requires entry for all fields except for the children's middle initials. Data entry personnel are prevented from proceeding to the next section of the website until all data are entered.

- *Period Count Verifications*. The QCIP coordinated with service area staff to acquire a list of children for whom they are responsible for entering data for the data collection period. If discrepancies were found, the QCIP worked closely with each of the service areas to go over the list of children. During the past year, it was discovered that some of the discrepancies were due to exceptional circumstances. In response, the QCIP adapted the web-based system to capture these exceptions.
- *Human Subjects Protection*. The QCIP developed procedures for the web-based data entry system to ensure human subjects protection and data security, including: (a) a list of approved users are allowed access to the online COSF system; (b) the online COSF system limits the operation time to 15 minutes per section - if there is no server activity for 15 minutes, it will time-out so as to protect child information from unapproved passers-by; (c) all data transmitted and received by the QCIP research team are encrypted using Secure Sockets Layer (SSL) technology; and (d) the web-based COSF data are saved as a secure Structured Query Language (SQL) database on the QCIP research team's server, accessible only to key personnel who have received Wayne State University's Human Investigation Committee's Human Subjects approval.

Baseline Data for FFY 2006 (July 1, 2006 - June 30, 2007)

- A new data collection method was implemented, using the COSF adapted from the ECO Center's COSF. In the FFY 2004 SPP, Michigan submitted a sampling plan to be used for the pilot study for early childhood outcomes. This plan divided the 57 service areas into three representative cohorts. OSEP approved this plan.
- For FFY 2006, Cohort 1, one-third of the 57 service areas, began collecting entry data on all children enrolling in Part C as of July 1, 2006 and progress data on any of those children exiting by June 30, 2007 who had received services continuously for at least six months.

Data for FFY 2007 (July 1, 2007 - June 30, 2008)

- For FFY 2007, Cohort 1 continued with data collection and Cohort 2 began collecting entry data on all children enrolling in Part C as of July 1, 2007 and progress data on any of those children exiting by June 30, 2008 who had received services continuously for at least six months.
- For FFY 2008, Cohort 1 and Cohort 2 are continuing data collection and Cohort 3 began collecting entry data on all children enrolling in Part C as of July 1, 2008 and progress data on any of those children exiting by June 30, 2009 who had received services continuously for at least six months,

Entry Results

During FFY 2007, entry data was collected for 5,447 children.

- Children enrolling in *Early On* during FFY 2007 most frequently show delays in the areas of Acquisition/Use of Knowledge and Skills (76.7%) and Use of Appropriate Behaviors to Meet Their Needs (73.7%), with somewhat fewer children showing delays in Positive Social-Emotional Skills (64.5%). See *Table 1* below.

Part C – SPP/APR (1)

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Table 1: Part C/Early On Child Outcomes - FFY 2007 Entry Results

	SPP3A Social-Emotional		SPP3B Acquisition/Use of Knowledge		SPP3C Use of Appropriate Behaviors	
	Number	Percent	Number	Percent	Number	Percent
Comparable to same-aged peers (Entry rating of 6 or 7)	1,936	35.5%	1,267	23.3%	1,433	26.3%
Below same-aged peers (Entry rating of 1-5)	3,511	64.5%	4,180	76.7%	4,014	73.7%
TOTAL	5,447	100%	5,447	100%	5,447	100%

Progress Results

- For FFY 2007, there were a total of 654 valid COSFs across the 38 service areas for children with entry data and exited by June 30, 2008 after receiving services for a minimum of six months. Tables 2 through 4 display the results for each of the outcome areas.

Table 2: Part C/Early On Child Outcomes - FFY 2007 Progress Results for **Positive Social-Emotional Skills**

Percent of infants and toddlers who:	Number	Percent
a. Did not improve functioning.	3	0.4%
b. Improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.	131	20.0%
c. Improved functioning to a level nearer to same-aged peers but did not reach it.	143	21.9%
d. Improved functioning to reach a level comparable to same-aged peers.	196	30.0%
e. Maintained functioning at a level comparable to same-aged peers.	181	27.7%
TOTAL	654	100%

Table 3: Early On Child Outcomes - FFY 2007 Progress Results for **Acquisition and Use of Knowledge and Skills**

Percent of infants and toddlers who:	Number	Percent
a. Did not improve functioning.	1	0.2%
b. Improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.	116	17.7%
c. Improved functioning to a level nearer to same-aged peers but did not reach it.	185	28.3%
d. Improved functioning to reach a level comparable to same-aged peers.	249	38.1%
e. Maintained functioning at a level comparable to same-aged peers.	103	15.7%
TOTAL	654	100%

Table 4: Early On Child Outcomes - FFY 2007 Progress Results for **Use of Appropriate Behaviors to Meet Their Needs**

Percent of infants and toddlers who:	Number	Percent
a. Did not improve functioning.	2	0.3%
b. Improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.	118	18.0%
c. Improved functioning to a level nearer to same-aged peers but did not reach it.	150	22.9%
d. Improved functioning to reach a level comparable to same-aged peers.	250	38.2%
e. Maintained functioning at a level comparable to same-aged peers.	134	20.5%
TOTAL	654	99.9%

Discussion of Data - FFY 2007:

The sample from which the progress data is drawn is not a representative sample, nor was it expected to be representative during the early years of data collection. As the sampling plan is implemented and data collection moves along into year five (FFY 2010), it will be appropriate to expect that the sample will be representative of both the children enrolled in Part C/*Early On* and of the demographics of the state. We have noted the following from our second year's **progress** data:

- Overall, the FFY2007 data indicates that children enrolled in *Early On* (n=654) improved functioning across the three outcomes, with greater than half achieving or maintaining functioning at a level comparable to same-aged peers for each of the three outcomes (categories d and e):
 - a. Positive Social-Emotional Skills: 57.6%
 - b. Acquisition and Use of Knowledge and Skills: 53.8%
 - c. Use of Appropriate Behaviors to Meet Their Needs: 58.7%
- a. *Positive Social-Emotional Skills:*
 - The overwhelming majority of children in the sample are making developmental progress during their enrollment in *Early On* (i.e. categories b through e; 99.5%, n = 651);
 - Over half of the sample changed their developmental trajectory and closed the gap between their development and that of same-aged peers without delays (categories c and d; 51.8%, n=339); and
 - Almost three-fifths (57.6%) either reached or maintained functioning at a level comparable to same-aged peers and are thus 'ready' for the next steps in their lives (categories d and e; n=377).
- b. *Acquisition and Use of Knowledge and Skills:*
 - 99.8% of the children in the sample improved functioning during their enrollment in *Early On* (categories b through e; n=653);
 - More than two-thirds of the children changed their developmental trajectory and closed the gap between their development and that of same-aged peers without delays (categories c and d; 66.4%, n=434); and
 - The majority reached or maintained functioning comparable with their same-aged peers (categories d and e; n=352, or 53.8%).
- c. *Use of Appropriate Behaviors to Meet Their Needs:*
 - 99.7% of the children in the sample improved functioning in the area of Using Appropriate Behaviors to Meet Their Needs during their enrollment in *Early On* (categories b through e; n=652);
 - A majority of the children changed their developmental trajectory and closed the gap between their development and that of same-aged peers without delays (categories c and d; 61.2%, n=400); and
 - The majority achieved or maintained functioning comparable with their same-aged peers (categories d and e; n=384, or 58.7%).

Overall, the data indicates that children enrolled in Part C/*Early On* improve functioning across the three outcomes, with more than half achieving or maintaining functioning at a level comparable to same-aged peers for each of the three outcomes.

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Discussion of Baseline Data:

FFY	Measurable and Rigorous Target
2005 (2005-2006)	No targets will be set at this time.
2006 (2006-2007)	No targets will be set at this time.
2007 (2007-2008)	No targets will be set at this time.
2008 (2008-2009)	No targets will be set at this time.
2009 (2009-2010)	No targets will be set at this time.
2010 (2010-2011)	No targets will be set at this time.

Improvement Activities/Timelines/Resources:

The following activities were included in the SPP that was updated in February 2006. An update on the progress of each activity is included.

Improvement Activity	Timelines	Resources
Activity: A child outcomes rating tool will be implemented to capture both entry and progress data on all children who enter and exit in FFY 2006 after at least six months of service.	Completed Ongoing	Interagency staff Part C contractors Stakeholders
Discussion: The tool has been created and implemented. Initial data analysis, coupled with feedback from local service areas, identified several features that could be improved. Improvements are underway and their impact will be monitored during the upcoming years.		
Activity: A handbook will be distributed and used to clarify procedures and policy around gathering child outcomes ratings, including appropriate assessment tools, timeframes for collecting data, etc.	Completed Ongoing	Interagency staff Part C contractors Stakeholders
Discussion: The handbook is in use and has been modified several times to respond to questions and feedback from local users, information gained from NECTAC and the ECO Center, and resources from the Outcomes conference website. Improvements to the handbook will continue as implementation of our child outcomes data collection continues.		
Activity: Local service area personnel will be trained to use the new child outcomes rating tool, and in best practices to ensure that parents are included in establishing child outcomes ratings.	Ongoing	Interagency staff Part C contractors

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Discussion: All 57 service areas have received training. The training protocol is being reviewed over the winter of 2008-2009 to integrate new materials from national resources and in response to questions and feedback from local users.		
Activity: Per the sampling plan submitted to OSEP, data collection on all children enrolling in <i>Early On</i> will be phased in between July 1, 2006 and July 1, 2008. Cohort 1 will begin collecting and reporting child outcomes data during FFY 2006.	January-June 2007 and ongoing	Local service areas Part C contractors
Discussion: Implementation of the data collection plan is proceeding as anticipated, Cohort 3 started data collection as of July 1, 2008. At that point all 57 local service areas are collecting and reporting child outcomes data.		
Activity: FFY 2006 data will be submitted to the Part C contractor for processing and analysis.	Completed Ongoing	Local service areas Part C contractors
Discussion: Data analysis for 2006 is complete. Data submission will continue, with preliminary analysis and data cleaning on an ongoing basis, and full analysis of the 2008 sample beginning August 2009.		
Activity: The Michigan Part C data system will be upgraded to ensure timely and accurate collection of outcome data.	2006-2008	Part C Administrative structure Michigan Part C data system contractor
Discussion: In addition to general Michigan Part C data system upgrades described under Indicator 1, updates to the data system will eventually include the collection of child outcomes data. This will eliminate duplicate data entry, provide a method for ensuring that child outcomes data is entered for every child in a timely manner, and enable Part C and 619 to align and utilize each other's child outcome data.		
Activity: Crosswalk Part C child outcomes with <i>Michigan Early Childhood Standards of Quality for Infants and Toddlers (ECSQ-I/T)</i> , <i>Early Development and Learning Strands</i> , which were adopted by the Michigan State Board of Education on December 12, 2006.	Winter 2008	Interagency staff
Discussion: This activity will help Michigan demonstrate the connections between Part C outcomes and the state-adopted early learning standards. While originally scheduled for winter 2007, this has been postponed in order to work on other priorities related to compliance.		
Activity: Monitor data measuring this indicator and develop additional improvement activities to improve the system: <ul style="list-style-type: none"> Individually, to improve individual IFSPs based on results. Locally, to improve local service area policy and procedures. Statewide, to improve policy and program decision making, including personnel development. 	2006-2010	Interagency staff Part C contractors MICC Stakeholders
Discussion: The child outcomes report will be shared with local service areas so that they can use it to support evaluation of their local systems. Likewise, the data will be presented to the Michigan Interagency Coordinating Council for discussion related to state-level improvements to <i>Early On</i> .		
Activity: Continue to utilize ECO Center and NECTAC resources as activities are implemented and results are reviewed.	2006-2010	Interagency staff Part C contractors
Discussion: Resources from the ECO Center and NECTAC have been very valuable as the child outcomes process has been implemented in Michigan. Such resources are continually reviewed and utilized to address questions and issues and to improve Michigan's process.		
Activity: Continue to link with 619 child outcomes efforts to ensure efficiency, consistency and continuity in child outcomes data collections efforts.	2006-2010	Interagency staff Part C contractors
Discussion: Several conversations took place between Part C and 619 staff regarding child outcomes data collection in which information was shared about the successes of each process; procedures were developed for sharing child outcomes ratings at age three as children exit from <i>Early On</i> and enroll in 619. Additionally, meetings are planned for coordinating the switch to collecting child outcomes data through the Michigan Part C data system and the Michigan 619 data system.		

Part C – SPP/APR (1)

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Activity: Distribute child outcomes FFY 2006 report to local service areas for review and discussion.	Winter 2008	Interagency staff Part C contractors
Discussion: A plan will be developed for sharing and discussing results of the first full year of child outcomes data collection in order to support greater understanding of the purpose and process, and support local system evaluation and development of local improvement activities.		
Activity: Improve system ability to predict how many and specifically which COSF forms should be entered into the data entry system.	Completed Spring 2008	Interagency staff Part C contractors Stakeholders
Discussion: During analysis of the FFY 2006 child outcomes data a discrepancy was discovered between actual numbers of children reported for child outcomes by the service areas compared to the child count in the Michigan Part C data system. Therefore, it will be necessary to develop and implement a process to monitor that all expected child outcomes data are submitted correctly in a timely manner. The switch to using the Michigan Part C data system to collect the child outcomes data should greatly improve the reliability of the data collection.		
Activity: Clarify definition of and processes for system 'Exit.'	Completed Spring 2008	Interagency staff Stakeholders
Discussion: Implementation of the child outcomes data collection process has led to many questions about 'Exit' from Part C; clearly defining the term will help improve data in the state data collection system, improve transition and exit practices, and increase the accuracy of the child outcomes data.		
Activity: Develop procedures that support local service areas to review and 'clean' their data prior to submission.	Spring 2008 - ongoing	Interagency staff Part C contractors
Discussion: Analysis of the FFY 2006 child outcomes data indicated there are many data errors that could potentially be identified and corrected locally, rather than after submission to the state contractor. Implementing a process for local review and correction, in conjunction with data cleaning for the entire data set, will inform and improve local child outcomes data collection efforts.		
Activity: Integrate the recommendations from two committees regarding appropriate assessment tools for eligibility determination and assessment to form a list of recommended tools for local service areas.	Spring 2009	Interagency staff Part C contractors Stakeholders
Discussion: While two separate committees have convened and made recommendations regarding appropriate, evidence-based developmental assessment tools for both the eligibility determination and child outcomes rating process, the recommendations still need to be reviewed and integrated, followed by development of guidance and implementation.		

Part C State Annual Performance Report (APR) for FFY 2007

Overview of the Annual Performance Report Development:

See Indicator #1 (page 1).

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

FFY	Measurable and Rigorous Target
2007	<ul style="list-style-type: none"> A. Families know their rights – 60% B. Families effectively communicate their children's needs – 55% C. Families help their children develop and learn – 78%

Actual Target Data for FFY 2007: A. 56%, B. 51%, C. 72%

The annual Part C/*Early On* Family Survey was adapted in FFY 2005 to include the National Center for Special Education Accountability Monitoring (NCSEAM) "*Impact of Early Intervention Services on Your Family*" scale, as well as trend items linked with state and federal priorities. Data for the NCSEAM survey items were sent to Avatar International LLC (NCSEAM-approved vendor) for analysis and reporting according to SPP requirements.

APR Template – Part C (4)

Michigan
State

Percent of families participating in Part C who report that early intervention services have helped the family:	FFY 2005 Baseline	FFY 2006 Actual	FFY 2007 Actual
4A: Know their rights.	56% ¹ (SE of the mean = 1.0%) [1360 ² /2439 ³] x 100= 55.8%	58% ¹ (SE of the mean = 0.9%) [1577 ² /2703 ³] x 100= 58.3%	56%¹ (SE of the mean = 0.9%) [1669 ² /2969 ³] x 100= 56.2%
4B: Effectively communicate their children's needs.	51% ¹ (SE of the mean = 1.0%) [1242 ² /2439 ³] x 100= 50.9%	54% ¹ (SE of the mean = 1.0%) [1453 ² /2703 ³] x 100= 53.8%	51%¹ (SE of the mean = 0.9%) [1505 ² /2969 ³] x 100= 50.7%
4C: Help their children develop and learn.	73% ¹ (SE of the mean = 0.9%) [1778 ² /2439 ³] x 100= 72.9%	75% ¹ (SE of the mean = 0.8%) [2025 ² /2703 ³] x 100= 74.9%	72%¹ (SE of the mean = 0.8%) [2147 ² /2969 ³] x 100= 72.3%

¹ Percentage of respondents at or above the indicator 4 NCSEAM standard score (539 for indicator 4A, 556 for indicator 4B and 516 for indicator 4C). Percent reported for indicators are rounded off.

² Number of respondents in the sample at or above the indicator standard score.

³ Number of respondents with a Rasch score.

Data source: Family Survey, Wayne State University, Center for Urban Studies

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

This report summarizes the data collected by the state of Michigan *Early On*/Part C Qualitative Compliance Information Project (QCIP) in 2008. It presents the findings from the *Early On* QCIP annual survey of the system's participants. This year's survey was distributed in March 2008. A total of 3,000 families currently in *Early On* completed the 'current' version of the 2008 survey, and 613 families that had transitioned out of *Early On* returned the 'transition' version. Three thousand families of those 6,966 mailed family outcome surveys completed and returned the survey, which provided a response rate of 43.1%. Rasch analysis was used to generate an Impact on Family Scale (IFS) score for **2,969 respondents**; the remaining 31 respondents did not answer a sufficient number of scale items to generate a score. When possible, comparisons are made between the 2008 survey results and those from previous years.

The findings in this report indicate that, overall, the *Early On* system is helping families, despite some challenges. Most respondents continue to report high levels of satisfaction with referrals, assessments, IFSPs, and service coordination.

Major findings from the survey include the following:

- *Declining levels of parent involvement (State Performance Plan Indicator 4).* The annual *Early On* Family Survey was adapted in 2006 to include question items for federal reporting requirements – the State Performance Plan (SPP) indicators for parent involvement. These items were included in the 2008 Family Survey. The results for SPP Indicator 4 are as follows:
 - *SPP 4A: Families Know Their Rights*
 - 56% of families reported that early intervention services have helped the family know their rights;

- Compared to the 2007 results (2,703 families), the rate for Michigan decreased from 58% to 56%, the same as in 2006 (2,484 families).
- *SPP 4B: Families Effectively Communicate Their Children's Needs*
 - 51% of families reported that early intervention services have helped the family effectively communicate their children's needs;
 - Compared to the 2007 results (2,703 families), the rate for Michigan decreased from 54% to 51%, the same as in 2006 (2,484 families).
- *SPP 4C: Families Help Their Children Develop and Learn*
 - 72% of families reported that early intervention services have helped the family help their children develop and learn;
 - Compared to the 2007 results (2,703 families), the rate for Michigan decreased from 75% to 72% and is also lower than in 2006 (73%; 2,484 families).
- *Child's ability to communicate reported as having the greatest impact on child's development.* In 2008, families reported their children have special needs that greatly/completely affect their development across seven areas. The area of greatest impact continues to be in the child's ability to communicate with others (30.5%). Over one-fifth of parents (21.2%) felt their children have special needs that affect the child's health or medical condition. The remaining developmental areas are each affected in under 20% of special needs children: mental or intellectual development (15.6%); physical mobility (19.5%); social/emotional development (17.5%); senses (15.4%); and adaptive development (17.5%). Additionally, 1.3% of the families feel that their child does not have special needs in any of the above areas.
- *No major changes in referral sources.* There were no major shifts in sources of referrals. Hospitals and doctors/nurses accounted for over half of referrals this year. Referrals from family/self, local schools, community mental health, and friends and neighbors decreased slightly. Referrals from the Department of Human Services and child care providers increased slightly.
- *Parents continue to have positive experiences with the assessment process.* The percentage of families reporting that their input was solicited during the assessment process is similar to the results from recent years at 89.0%. Most respondents (92.7%) agreed that *Early On* staff asked them appropriate questions about the needs of their family and child, and that staff seem to know what they are talking about. The vast majority (about 90%) of respondents also reported that the assessment process was respectful of their family and culture and that the assessment was completed promptly.
- *Recognition of initial IFSP meetings remains high, but fewer are occurring within the 45-day timeline.* In 2008, 90% of respondents indicated they had an IFSP meeting. This is an increase of over seven percentage points from 2006 and one percentage point from 2007. It is also the highest score since 2000. However, the percentage of respondents who indicated their IFSP meeting took place in 45 days or less decreased from last year (72.8% in 2007 to 69.8% in 2008). Many families (almost 80%) felt that their IFSP has been keeping up with their family's changing needs. Over 80% of parents (83.0%) felt that when they mentioned something about their child's special needs, it was taken into consideration. A slightly smaller percentage of parents (74.9%) felt similarly in terms of their family's special needs. There is also a consistent finding that families feel they have more input related to their child's needs as compared to their family's needs.
- *Slight decreases in family satisfaction and knowledge of rights within the IFSP process.* The percentage of families who reported they were fully informed of their rights when they agreed to the IFSP process was 78.3% in 2008. This was a slight decrease as compared to the 2007 results (79.6%) and was lower than the results in the upper 80th percentile from 2000-2005. There was also a decrease in satisfaction with their most recent IFSP meeting (88.9% in 2008 versus 91.5% in 2007). Further analyses revealed that there is no relationship between respondents' satisfaction with services and the respondents' ethnicity or income level, nor with the children's gender, age, ethnicity or eligibility for special education. However, it showed that there is a statistically significant inverse

correlation between satisfaction levels and the child's severity of disability – as the child's severity of disability goes up, the parent's level of satisfaction went down.

- More IFSP reviews related to family perception of responsiveness. The findings indicated that there was a slight decrease with respect to frequency of review, with 45.4% of 2008 respondents reporting that their IFSP was updated every six months as compared to 47.6% in 2007. Likewise, there was a four percentage point decrease between 2007 and 2008 in the percentage of respondents who thought that their IFSP was keeping up with their family's changing needs (77.8% in 2008, 82.1% in 2007). Just having a review, either semi-annually or annually, was associated with a greater perception of responsiveness.
- Service coordination ratings are down slightly. There was a decrease in the percentage of respondents who recognized having a service coordinator compared to last year (73.8% in 2008 versus 78.3% in 2007). Respondents' ratings of their service coordinators had a small dip over the past year's ratings, including the overall satisfaction with service coordination (85.2% in 2008 versus 87.8% in 2007).
- Service providers continue to receive high ratings. As with previous years, almost all of the respondents had positive experiences with their service providers. Over 90% of families reported that their service provider was dependable, knowledgeable and professional, easy to talk to, and is good at working with the family. Families also felt that they kept in regular contact with the provider, and the provider supplied them with information and training so they could help their child.
- Service setting. The proportion of respondents who indicated their child received services in the home or wherever their child spent most of his or her time had a one percentage point drop from 82.8% in 2007 to 81.9% in 2008. A percentage of families similar to last year's (55.0% in 2008 versus 55.5% in 2007) received services in settings where children without special needs participate.
- Service quality. Although all five service quality indicators changed slightly this year, the ratings of quality remained stable overall. The majority of respondents (88.6%) rated the services they received favorably; this is a slight increase from last year (87.8%). Families with IFSP meetings gave significantly (statistically) more positive ratings to the services they received than families without IFSP meetings or a coordinator.
- Families believe Early On helps them better understand their child's needs, but is less helpful in connecting them to other parents. The program did well in helping nearly all the families to increase their skills and knowledge with respect to their child's care. With regard to the family, the program had the most impact on helping them better understand their child's special needs (93.0%). The lowest level of family impact was in helping families get in touch with other parents for help and support (50.7%). With regard to their child, the greatest impact was in mental or intellectual development (79.5%). The least impact was found in families with children who had special needs regarding physical conditions such as hearing, vision or general health (40.2%).
- Family-centered services and other scales. The mean Family-Centered Scale was 4.46 out of a potential 6.0, suggesting a moderate level of family-centeredness. Scales measuring ratings of service coordination, having needs met, timeliness, and overall family satisfaction have remained at medium levels (4.1 to 4.6) for the past five years. Family impact was at a moderate level (4.42 out of 6.0). The mean score on child impact was also moderate (3.49 out of 5.0).
- Families living in urban areas perceive lower levels of implementation. Differences in the program implementation scales were found by service area peer group. Generally, respondents from urban areas had lower mean scores across implementation measures than respondents from other areas. Statistically significant differences were found in the Family Centeredness Scale, Family Needs Met Scale, and Family Assessment Scale, where respondents from urban areas reported lower scores than respondents from rural counties and/or respondents from metro areas or medium sized cities.

- Program impacts also rated lower by families in urban areas. There was a statistically significant difference in program outcomes by service area peer group. Respondents from rural counties had significantly higher Family Impact scores than those from urban areas.
- Transition 90-day timeline vastly improved. Transition families reported positive feedback throughout the transition process despite slight decreases in several areas, including: informing families about service/program options appropriate for their child at age three; allowing enough time to explore service/program options before their child turned three; and reporting receiving a transition booklet. Nevertheless, some improvements have been made in 2008. Key areas with improvements include planning for the child's transition at least 90 days in advance of the child's third birthday (77.0% in 2008 and 64.5% in 2007--this was statistically significant); and going through an IFSP session where transition was discussed (77.0% in 2008 and 72.1% in 2007).
- Impact on transition families. Families whose children had transitioned out of *Early On* reported a similar level of impact on the family as families whose children were currently in *Early On* (means=4.35 and 4.42 out of 6.0, respectively).

Part C State Performance of Indicator 4 (Impact on Family)

SPP/APR Indicator 4A: Percent of families participating in Part C who report that early intervention services have helped the family:

A. *Know their rights*

Percent at or above Indicator 4A standard: **56%** (SE of the mean = 0.9%)

SPP/APR Indicator 4B: Percent of families participating in Part C who report that early intervention services have helped the family:

B. *Effectively communicate their children's needs.*

Percent at or above Indicator 4B standard: **51%** (SE of the mean = 1.0%)

SPP/APR Indicator 4C: Percent of families participating in Part C who report that early intervention services have helped the family:

C. *Help their children develop and learn.*

Percent at or above Indicator 4C standard: **72%** (SE of the mean = 0.8%)

Number of Valid Responses: 2,969 Mean Measure: 599

Measurement reliability: 0.94 Measurement SD: 154

Averages of 8 U.S. states' 1,750 families participating in the 2005 NCSEAM Pilot Study:

Indicator	A	B	C	SE of Mean	Mean Measure	SD
Value	74%	70%	84%	0.9%-1.1%	644	158

Source: Avatar International Report

Five Items below represent areas to target for improvement:

- I was offered help I needed, such as child care services or transportation, to participate in the IFSP. (616)
- My family was given information about community programs that are open to all children. (623)
- My family was given information about how to advocate for my child and my family. (625)
- My family was given information about organizations that offer support for parents of children with disabilities. (636)
- My family was given information about opportunities for my child to play with other children. (641)

APR Template – Part C (4)

Michigan
State

Improvement Activities/Timelines/Resources:

The following activities were included in the FFY 2006 APR and in the SPP that was updated in February 2006. An update on the process of each activity is included:

Improvement Activity	Timelines	Resources
Activity: Collaborate with existing in-state family-focused projects to understand their purpose and outcomes, and maximize their impact on achieving Part C family outcomes.	Continuing for 2007-2010	Parent Training and Information Center (PTI) Part B/C Family Project Parent Leadership initiatives
Discussion: The Parent Involvement Committee (PIC) of the MICC met with the Michigan Alliance for Families, the PTI, and Citizens Alliance to Uphold Special Education (CAUSE) in February and March 2007 to learn about ongoing activities to support Part C parents. Representatives from these two projects are members of the PIC and attend regular meetings and provide ongoing updates about their work.		
A chart was developed to help understand the purpose and outcomes of each existing project and which aspects of <i>Early On's</i> five family outcomes the project will help address.		
Activity: Request/review additional analysis of family survey data by demographic characteristics (geographical, Part C only vs. enrolled in both Part C and Michigan Special Education; race; age of child; service coordination model in use in local community, etc.), to illustrate any correlations between demographics and higher scores.	Completed Ongoing as annual survey results are received	QCIP project Avatar International, Inc. PIC Interagency staff
Discussion: Wayne State University (WSU) shared an analysis of demographic data with the PIC in March 2007. The data did exhibit differences between service area peer groups as well as for children who are Part C only; however, additional years of data must be analyzed to develop more targeted improvement activities.		
The committee will continue to analyze data from the annual survey.		
Activity: Analyze what other states who report high impact of early intervention are doing regarding family outcomes, including how much of their state budget is committed to achieving each family outcome, and what it is purchasing.	Completed	PTI and PTI Network Early Intervention Family Alliance RRCs NECTAC ECO Center PIC Interagency staff
Discussion: The analysis was completed but did not yield information that would be helpful to changing practice.		
Activity: Review research already gathered during Redesign activities on best practices regarding family outcomes.	Completed	PIC Interagency staff
Discussion: This information was gathered and some themes emerged from Redesign, which include: parent-to-parent support and mentoring, and providing training to parents and professionals together. These strategies are being implemented by MDE's parent support contractor.		
Activity: Use results of additional analysis/data gathering/research review to guide development of a list of promising practices to consider implementing in upcoming years.	Completed	PIC Interagency staff Part C contractors
Discussion: Themes from the analysis centered around parent-to-parent support, communication about rights, program knowledge, community resources/involvement, and looking at parents as service coordinators as a way to create that type of communication. This ties into work being done to develop a document that defines early intervention services and connects personnel standards to the services being provided.		
Activity: Review and modify Part C budget and grants to reflect that parents are equal partners in achieving their child's outcomes.	Completed	Part C Administrative structure MICC PIC
Discussion: This activity was achieved through the CSPD Request for Proposals (RFP). A parent was one of the readers for the RFP. The RFP included provisions to invite parents to participate in the trainings offered around the state and be trained side-by-side with professionals. This was included in the final contract with the winning agency. Additionally, the CSPD contractor will work with the family training contractor to plan and implement a parent symposium on <i>Early On</i> .		

APR Template – Part C (4)

Michigan
State

Activity: Ensure that any projects involved in collecting family outcomes data for Part C are advised by and responsive to an advisory body of Part C parents.	Completed	Part C Administrative structure MICC PIC
Discussion: The development of a parent advisory committee was included in the RFP for the family outcomes data collection project.		
Activity: Add item(s) to Family Survey to gather family input on approximately how many hours/month they are involved in <i>Early On</i> activities that help to achieve the three family outcomes.	2007 - 2010	QCIP Project PIC
Discussion: Due to lack of funds to reimburse parents in September and October 2007, the PIC did not meet; therefore, they have not yet had an opportunity to discuss the possibility of adding these questions to the survey. The budget has been resolved and new MICC appointments have been made; therefore, the committee will begin to meet again in February 2008 and will address this activity throughout the year. The goal of the activity is to determine if there is correlation between the amount of services received and positive family outcomes.		
Activity: Assess impact of implementation plan; develop and implement new activities as needed.	2008-2010	Interagency Staff PIC
Discussion: Due to lack of funds to reimburse parents in September and October 2007, the PIC did not meet; therefore, this activity did not occur. The budget has been resolved and new MICC appointments have been made; therefore, the committee will begin to meet again in February 2008. The PIC reviewed the implementation plans in October and March, looking for data demonstrating the impact of early intervention services on families.		
Activity: Develop and deliver a presentation to increase parent and provider understanding of the family survey results, particularly the NCSEAM results (how it works, what the data means, etc.).	Completed	CSPD contractor Family Training contractor PTI contractor Family Survey Data Collection contractor
Discussion: While state interagency staff and members of the PIC have a better understanding of the NCSEAM survey and how to interpret the results, there is a need to extend this information sharing and improve understanding for other state ICC members and to providers, families, and ICC members in local service areas.		
Activity: Analyze return rate by service area, as well as mean score and range of scores; send results to each local service area.	Completed	Family Survey Data Collection contractor
Discussion: Individual service areas will be able to analyze their family outcomes results and identify areas for improvement.		
Activity: Review data with service areas and existing in-state, family-focused projects to plan improvement activities to help achieve Part C family outcomes.	Fall 2008 – ongoing	NCRRC IT Kit materials Family Survey Data Collection contractor CSPD contractor Family Training contractor PTI contractor
Discussion: Beyond expanding the understanding of the NCSEAM survey, there is a need to help local service areas and the family support projects understand how they can use the survey results and results of the analysis of “promising practices” to help identify their own improvement activities related to family outcomes.		
Activity: Develop a reference bulletin for improving family outcomes related to family survey results.	Spring 2009	CSPD contractor Family Training contractor Interagency staff PIC
Discussion: While Michigan has historically valued parent involvement and surveyed parents to determine their view of <i>Early On</i> , guidance on improving family outcomes has not been developed. This guidance will help service areas develop activities based on their local analysis of data to improve results for their families.		
Activity: Determine means to create parent peer mentors or parent-to-parent models, especially related to service coordination and personnel standards.	Fall 2008 – ongoing	Family Training contractor PTI contractor
Discussion: The PIC identified these strategies as the most likely to increase the impact of <i>Early On</i> services as they relate to family outcomes.		

APR Template – Part C (4)

Michigan
State

Activity: Perform analysis demonstrating convergent validity of NCSEAM family survey results and other APR data as well as results from other sections of the Family Survey.	Fall 2009	Family Survey Data Collection contractor
Discussion: Michigan will learn more about its performance in meeting family outcomes from an analysis of the convergent validity of the NCSEAM survey results with other APR data, and with data from other sections of the Family Survey. This analysis will also allow the state to develop more targeted improvement activities.		
Activity: Evaluate means to increase response rate for subgroups responding to the Family Survey, as identified through analysis and results.	Annually	Family Survey Data Collection contractor
Discussion: Again this year, the Family Survey sample is not representative of the race of the children enrolled in <i>Early On</i> , or of the families living in urban areas. There is a need to evaluate and develop new means to attempt to address this discrepancy.		

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Additional information regarding methodology, representativeness, and the actual surveys can be found in Appendices A and B.

Part C State Annual Performance Report (APR) for FFY 2007**Overview of the Annual Performance Report Development:**

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C**Indicator 5:** Percent of infants and toddlers birth to one year with IFSPs compared to:

- A. Other states with similar eligibility definitions; and
- B. National data.

Measurement:

- A: Percent = [(# of infants and toddlers birth to one year old with IFSPs) divided by the (population of infants and toddlers birth to one)] times 100 compared to the same percent calculated for other states with similar eligibility definitions.
- B: Percent = [(# of infants and toddlers birth to one year old with IFSPs) divided by the (population of infants and toddlers birth to one)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2007	1.3%

Actual Target Data for FFY 2007: 1.08%

The percent of children birth to one year of age served in Michigan for FFY 2007 was **1.08%**. The 57 service areas served a snapshot total of 1,375 children aged birth to one year on December 1, 2007 while the number of births in 2007 was 127,499.

Percent served, birth to one year					
	FFY 2003	FFY 2004	FFY 2005	FFY 2006	FFY 2007
Michigan	1.0%	1.1%	1.03%	1.08%	1.08%
Hawaii	3.0%	2.8%	2.31%	6.98%	5.00%
Louisiana	1.3%	1.7%	1.79%	0.83%	1.27%
Ohio	0.9%	0.8%	1.33%	1.43%	1.67%
Vermont	1.0%	0.9%	1.10%	1.34%	1.36%
National	0.9%	0.9%	0.95%	1.04%	1.06%

Data sources: Michigan Part C Data System, December 2007 collection; IDEA data charts

APR Template – Part C (4)

Michigan
State

Related Data

Referral Source	FFY 2002	FFY 2003	FFY 2004	FFY 2005	FFY 2006	FFY 2007
Education	74	56	74	76	72	82
Family	95	159	175	184	191	131
Health Dept.	227	240	222	221	201	104
Hospitals	517	543	597	532	568	391
Mental Health	16	13	13	7	7	4
Other	151	100	110	108	145	112
Physicians	30	66	73	109	75	76
Human Services	43	33	83	95	112	94
Unknown	145	208	139	87	104	474
Total	1298	1418	1486	1419	1475	1468

Data source: Michigan Part C Data System, December 2007 collection

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

The number of referrals from unknown sources is larger than years in the past, due to the Part C data collection system changing from EETRK to MICIS. Michigan does a June 1 count as well as a December 1 count. The issue should be resolved by the June 1, 2009 count.

Improvement Activities

The following activities were included in the FFY 2005 APR and in the SPP that was updated in February 2006. An update on the progress of each activity is included.

Improvement Activities	Timelines	Resources
Activity: The <i>Early On</i> system will develop a joint policy for the Michigan Department of Education and the Michigan Department of Human Services responding to CAPTA and IDEA legislation for referral of all children substantiated for abuse and neglect.	Completed	Ad Hoc subcommittee of the MICC
Discussion: The CAPTA Ad Hoc workgroup completed its work and made recommendations regarding CAPTA referrals during the reporting period. The recommendation was to refer all victims of children in category one or two cases based on a preponderance of evidence of abuse/neglect. The Department of Human Services (DHS) initiated an automatic referral process with statewide rollout in January 2008. The DHS will review the data with regard to the number of referrals that are generated in FFY 2007 to determine if the automated referral has an impact on increasing the numbers of children found eligible for Part C. Additionally, the DHS has updated its policy with regard to CAPTA and <i>Early On</i> and the approved policy is planned to go into effect in January 2008. It will provide additional guidance to local DHS workers regarding the interactions between DHS and <i>Early On</i> .		
Activity: The <i>Early On</i> system will implement the new monitoring system, CIMS, with identification rate as a priority area.	Completed	Part C Coordinator CIMS contractor
Discussion: In FFY 2004, two service areas were identified as pilot sites for focused monitoring based on their identification rates. Both have shown improvement since that time. In FFY 2005, one service area was visited based on low performance with this indicator. That service area improved performance to meet the state target within one year. In FFY 2006, one additional service area was visited based on low performance with this indicator. That service area has submitted an improvement plan that has been approved by MDE. Also in FFY 2006, Michigan utilized data on performance indicators as well as compliance indicators in making determinations. Based on determinations made in June 2007, four service areas were selected as focused monitoring sites for FFY 2007. Three of the four were not meeting the state target of 1.1% in FFY 2005. They will be required to submit improvement plans and quarterly reports demonstrating improvement through FFY 2008.		

APR Template – Part C (4)

Michigan
State

Activity: Implement public awareness activities as identified through the <i>Early On</i> Redesign.	Completed	Public awareness contractor MICC
Discussion: The public awareness contractor completed the activities as identified in the work plan. These included advertisements on buses, billboards, and the radio in selected service areas and the provision of 18,000 <i>Early On</i> brochures for literacy kits shipped to every licensed child care provider in the state.		
Activity: The Eligible Population Task Force will review the eligibility definition, conducting a prevalence study and reviewing Michigan's eligibility process.	Completed	Eligible Population Task Force
Discussion: The Eligible Population Task Force, formed as a part of Redesign, has reviewed and taken public comment regarding Michigan's Part C eligibility definition. The proposed definition sets eligibility for infants under two months adjusted age at any level of delay with re-determination within six months, and eligibility for children over two months adjusted age with a 20% delay in one or more areas of development. After the reporting period, the proposed changes to Michigan's Part C eligibility went out for public hearing in November 2007. After consideration of public comment, if Michigan decides to go forward with the change in eligibility, formal OSEP approval will be requested before implementation.		
Activity: The Michigan Part C data system will be upgraded to ensure timely and accurate collection of utilization, outcome, and cost data for <i>Early On</i> .	2006 – 2008	Part C Administrative Structure Michigan Part C data system contractor
Discussion: Enhancements to the data collection system were made so that all data needed for the APR could be obtained through the state data system.		
Activity: Develop request for proposals for training, technical assistance, child find, and public awareness contracts.	Completed	Interagency staff
Activity: Award training and technical assistance, child find, and public awareness contracts.	Completed	MDE
Discussion: A new public awareness contract was awarded beginning October 2007. The contract combines public awareness and referral activities for both Part C and Part B of IDEA. This has allowed the contractor to better utilize resources to increase the public awareness strategies and materials utilized statewide and available to local service areas, many at no cost to the local service areas. The contractor has created a web-based referral process in addition to accepting toll-free telephone and fax referrals.		
Activity: Analyze data measuring this indicator and develop additional improvement activities.	Ongoing with annual review through 2010	Interagency staff Part C contractors MICC Stakeholders
Discussion: As evidenced in the APR, analysis of data from multiple sources related to the SPP indicators has led to the development of additional, more targeted, improvement activities.		
Activity: Analyze effect of the electronic CAPTA referral system.	Winter 2008 and ongoing	Public awareness contractor DHS staff
Discussion: Data will be analyzed to see if children eligible for Part C are being identified through the electronic CAPTA referral system.		
Activity: Implement additional public awareness strategies as developed by the public awareness and referral information contractor.	Fall 2007 and ongoing	Public awareness contractor MDE grant manager
<p>Discussion: The Public Awareness and Referral contractor launched a media campaign which included 293 radio Public Service Announcement commercials, statewide, from September 2007-October 2007. Also purchased were 28 thirty-second spots on Public Radio highlighting information about the Part C system, during the same timeframe, in English and Spanish.</p> <p>Also from September 2007-October 2007 a billboard campaign occurred which targeted metropolitan areas, with an emphasis on the birth to one population.</p> <p>The two campaigns were done simultaneously to have the greatest impact, reaching out visually, through the billboards, and auditorally through the radio.</p> <p>An additional market was tapped into, which included print advertising, also with an emphasis on the birth to one population. Advertisements were purchased in Metro Baby magazine which targeted large metropolitan service</p>		

APR Template – Part C (4)

Michigan
State

<p>areas in May 2008 and November 2008. A similar advertisement was purchased in Grand Rapids Family magazine in June 2008 and November 2008.</p> <p>The statewide <i>Early On</i> display board is taken and displayed at many different conferences around the state throughout the year.</p>		
<p>Activity: Limit the amount of Part C funds used by each local service area for public awareness activities.</p>	<p>Summer 2008</p>	<p>Interagency staff Public awareness contractor</p>
<p>Discussion: The Public Awareness and Referral contractor prints numerous products that local service areas may order, free of charge, such as the <i>Early On</i> Guidebooks, brochures, and child development wheels. New products that are available include:</p> <ul style="list-style-type: none"> • <i>Early On</i> Project Find web cards which highlight the <i>Early On</i> website. These are also shared at conferences around the state, when the display board is used. • <i>Early On</i> Project Find referral magnets for both professionals and parents. • Growth charts, containing similar information as the child development wheel but in a chart format, so parents can chart the growth of their child up to 5 years of age. <p>Watch Me Grow calendars, created in partnership with the Michigan State University Extension, which are given to local service areas to share with parents.</p>		
<p>Activity: Continue to work with the Michigan Chapter of the American Academy of Pediatrics (AAP) on Assuring Better Child Health and Development (ABCD) grant to improve universal developmental screening at well child visits.</p>	<p>Completed</p>	<p>DCH – Medicaid Michigan Chapter (AAP)</p>
<p>Discussion: The ABCD Project promotes the use of an objective developmental screening tool as part of well-child care. The target population is infants and toddlers, age birth to three who are eligible for Medicaid. A pilot study was done in nine pediatric practices and data from the first six months looks promising for identifying children who are eligible for early intervention services.</p>		

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Part C State Annual Performance Report (APR) for FFY 2007**Overview of the Annual Performance Report Development:**

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C

Indicator 6: Percent of infants and toddlers birth to three years with IFSPs compared to:

- A. Other states with similar eligibility definitions; and
- B. National data.

Measurement:

A: Percent = [(# of infants and toddlers birth to three years with IFSPs) divided by the (population of infants and toddlers birth to one)] times 100 compared to the same percent calculated for other States with similar eligibility definitions.

B: Percent = [(# of infants and toddlers birth to three years with IFSPs) divided by the (population of infants and toddlers birth to one)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2007	2.4%

Actual Target Data for FFY 2007: 2.44%

The percent of children birth to three years of age served in Michigan for FFY 2007 was **2.44%**. The 57 service areas served a snapshot total of 9,388 children aged birth to three years old on December 1, 2007 while the total number of births for 2005-2007 was 384,706.

	Percent served, birth to three years				
	FFY 2003	FFY 2004	FFY 2005	FFY 2006	FFY 2007
Michigan	2.1%	2.2%	2.2%	2.30%	2.44%
Hawaii	4.4%	4.3%	4.31%	7.48%	6.94%
Louisiana	1.8%	2.3%	1.76%	1.27%	1.78%
Ohio	1.9%	1.8%	2.47%	2.64%	2.98%
Vermont	3.3%	3.2%	3.20%	3.45%	4.00%
National	2.18%	2.2%	2.34%	2.43%	2.52%

Data sources: Michigan Part C Data System, December 2007 collection; Michigan Department of Community Health, 2005 - 2007

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:**Progress and Slippage:**

Michigan continued to increase the percent of children birth to three years of age served in FFY 2007, meeting the state target of 2.4%. The number of children served also increased from 8,836 to 9,388. While Michigan has not yet met the national average for children served birth to three years, statewide

APR Template – Part C (4)

Michigan
State

data collected June 1, 2007 reveal that the percent served at that time was 2.38%. Data from December 1, 2007 show a total of 9,388 children in service on that date, an increase of 552 children from FFY 2006.

Related Data

Referral Source	FFY 2002	FFY 2003	FFY 2004	FFY 2005	FFY 2006	FFY 2007
Education	1,187	1,234	1,312	1,301	1,281	883
Family	2,089	3,134	3,390	3,740	4,047	2043
Health Dept	1,983	1,976	1,966	1,954	2,074	898
Hospital	2,771	2,680	2,986	3,030	3,045	1807
Mental Health	171	154	161	126	105	47
Other	2,121	1,556	1,600	1,527	1,614	1766
Physician	643	1,073	1,514	1,948	2,209	1099
Social Services	538	426	561	752	896	512
Unknown	2,042	2,349	1,997	1,481	1,460	8709
Total	13,545	14,582	15,487	15,859	16,731	17,764

Data source: Michigan Part C Data System, December 2007 collection

Improvement Activities

The following activities were included in the FFY 2005 APR and in the SPP that was updated in February 2006. An update on the progress of each activity is included.

Improvement Activities	Timelines	Resources
Activity: The <i>Early On</i> system will develop a joint policy for the Michigan Department of Education and the Michigan Department of Human Services responding to CAPTA and IDEA legislation for referral of all children substantiated for abuse and neglect.	Completed	Ad Hoc subcommittee of the MICC
Discussion: The CAPTA Ad Hoc workgroup completed its work and made recommendations regarding CAPTA referrals during the reporting period. The recommendation was to refer all victims of children in category one or two cases based on a preponderance of evidence of abuse/neglect. The Department of Human Services (DHS) initiated an automatic referral process with statewide rollout in January 2008, after the end of the reporting period. The DHS will review the data with regard to the number of referrals that are generated in FFY 2007 to determine if the automated referral has an impact on increasing the numbers of children found eligible for Part C.		
Additionally, the DHS has updated its policy with regard to CAPTA and <i>Early On</i> and the approved policy is planned to go into effect in January 2008. It will provide additional guidance to local DHS workers regarding the interactions between DHS and <i>Early On</i> .		
Activity: The <i>Early On</i> system will implement the new monitoring system, CIMS, with identification rate as a priority area.	Completed	Part C Coordinator CIMS contractor
Discussion: In FFY 2004, two service areas were identified as pilot sites for focused monitoring based on their identification rates. Both have shown improvement since that time. In FFY 2005, one service area was visited based on low performance with this indicator. That service area improved performance to meet the state target within one year. In FFY 2006, one additional service area was visited based on low performance with this indicator. That service area has submitted an improvement plan that has been approved by MDE. Also in FFY 2006, Michigan utilized data on performance indicators as well as compliance indicators in making determinations. Based on determinations made in June 2007, four service areas were selected as focused monitoring sites for FFY 2007. Three of the four were not meeting the state target of 1.1% in FFY 2005. They will be required to submit improvement plans and quarterly reports demonstrating improvement through FFY 2008.		
Activity: Implement public awareness activities as identified through the <i>Early On</i> Redesign.	Completed	Public awareness contractor MICC

APR Template – Part C (4)

Michigan
State

Discussion: The public awareness contractor completed the activities as identified in the work plan. These included advertisements on buses, billboards, and the radio in selected service areas and the provision of 18,000 <i>Early On</i> brochures for literacy kits shipped to every licensed child care provider in the state.		
Activity: The Eligible Population Task Force will review the eligibility definition, conducting a prevalence study and reviewing Michigan's eligibility process.	Completed	Eligible Population Task Force
Discussion: The Eligibility Population Task Force, formed as a part of Redesign, has reviewed and taken public comment regarding Michigan's Part C eligibility definition. The proposed definition sets eligibility for infants under two months adjusted age at any level of delay with re-determination within six months, and eligibility for children over two months adjusted age with a 20% delay in one or more areas of development. After the reporting period, the proposed changes to Michigan's Part C eligibility went out for public hearing in November 2007. After consideration of public comment, if Michigan decides to go forward with the change in eligibility, formal OSEP approval will be requested before implementation.		
Activity: The Michigan Part C data system will be upgraded to ensure timely and accurate collection of utilization, outcome, and cost data for <i>Early On</i> .	2006 – 2008	Part C Administrative Structure Michigan Part C data system contractor
Discussion: Enhancements to the data collection system were made so that all data needed for the APR could be obtained through the state data system.		
Activity: Develop request for proposals for training, technical assistance, child find, and public awareness contracts.	Completed	Interagency staff
Activity: Award training and technical assistance, child find, and public awareness contracts.	Completed	MDE
Discussion: A new public awareness contract was awarded beginning October 2007. The contract combines public awareness and referral activities for both Part C and Part B of IDEA. This has allowed the contractor to better utilize resources to increase the public awareness strategies and materials utilized statewide and available to local service areas, many at no cost to the local service areas. The contractor has created a web-based referral process in addition to accepting toll-free telephone and fax referrals.		
Activity: Analyze data measuring this indicator and develop additional improvement activities.	Ongoing with annual review through 2010	Interagency staff Part C contractors MICC Stakeholders
Discussion: As evidenced in the APR, analysis of data from multiple sources related to the SPP indicators has led to the development of additional, more targeted, improvement activities.		
Activity: Analyze effect of the electronic CAPTA referral system.	Winter 2008 and ongoing	Public awareness contractor DHS staff
Discussion: Data will be analyzed to see if children eligible for Part C are being identified through the electronic CAPTA referral system.		
Activity: Implement additional public awareness strategies as developed by the public awareness and referral information contractor.	Fall 2007 and ongoing	Public awareness contractor MDE grant manager
<p>Discussion: The Public Awareness and Referral contractor launched a media campaign which included 293 radio Public Service Announcement commercials, statewide, from September 2007-October 2007. Also purchased were 28 thirty-second spots on Public Radio highlighting information about the Part C system, during the same timeframe, in English and Spanish.</p> <p>Also from September 2007-October 2007 a billboard campaign occurred which targeted metropolitan areas, with an emphasis on the birth-to-one population.</p> <p>The two campaigns were done simultaneously to have the greatest impact, reaching out visually, through the billboards, and auditorally through the radio.</p> <p>An additional market was tapped, which included print advertising, also with an emphasis on the birth to one population. Advertisements were purchased in Metro Baby magazine which targeted large metropolitan service areas in May 2008 and November 2008. A similar advertisement was purchased in Grand Rapids Family magazine in June 2008 and November 2008.</p>		

APR Template – Part C (4)

Michigan
State

The statewide <i>Early On</i> display board is taken and displayed at many different conferences around the state throughout the year.		
Activity: Limit the amount of Part C funds used by each local service area for public awareness activities.	Summer 2008	Interagency staff Public awareness contractor
Discussion: The Public Awareness and Referral contractor prints numerous products that local service areas may order, free of charge, such as the <i>Early On</i> Guidebooks, brochures, and child development wheels. New products that are available include: <ul style="list-style-type: none"> • <i>Early On</i> Project Find web cards which highlight the <i>Early On</i> website. These are also shared at conferences around the state, when the display board is used. • <i>Early On</i> Project Find referral magnets for both professionals and parents. • Growth charts, containing similar information as the child development wheel but in a chart format, so parents can chart the growth of their child up to 5 years of age. <p>Watch me Grow calendars, created in partnership with the Michigan State University Extension, which are given to local service areas to share with parents.</p>		
Activity: Continue to work with the Michigan Chapter of the American Academy of Pediatrics (AAP) on Assuring Better Child Health and Development (ABCD) grant to improve universal developmental screening at well child visits.	Completed	DCH – Medicaid Michigan Chapter (AAP)
Discussion: The ABCD Project promotes the use of an objective developmental screening tool as part of well child care. The target population is infants and toddlers, age birth to three who are eligible for Medicaid. A pilot study was done in nine pediatric practices and data from the first six months looks promising for identifying children who are eligible for early intervention services.		

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Part C State Annual Performance Report (APR) for FFY 2007

Overview of the Annual Performance Report Development:

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

[(# of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed)] times 100.

FFY	Measurable and Rigorous Target
2007	100%

Actual Target Data for FFY 2007: 87.10%

All children referred to *Early On* are required to receive a comprehensive evaluation for eligibility and assessment of development and an initial IFSP meeting within 45 calendar days of referral. For this data collection activity, each local early intervention program was instructed to pick a representative sample of 10%, or no less than 10 children for small local early intervention programs, based on gender, ethnicity, eligibility (Part C or Part C and Michigan Special Education), and age. The data from the record review of the files from that sample was analyzed to compute the target data for FFY 2007. There were **87.10%** (797 of 915 of which there were 104 exceptional family circumstances) of eligible infants and toddlers with IFSPs who were first enrolled between July 1, 2007 and June 30, 2008 and had an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.

Calculation: 797, including 104 exceptional family circumstances, divided by 915 (total IFSPs reviewed) = .8710 X 100= 87.10%

Based upon FFY 2007 data, early intervention programs were issued findings of noncompliance in December 2008. Local early intervention programs were required to create corrective action plans and correct noncompliance as soon as possible, but no later than one year, including verification.

The increase in performance rate in FFY 2007 as compared to FFY 2006 (63.1%) may be attributed to a number of factors. Michigan's comprehensive system of personnel development held several trainings to ensure that local early intervention programs understood the requirements of Indicator 7. In particular, how to document exceptional family circumstances and what must occur within 45-days of referral. In addition, the state revised its requirement for identifying findings. The state also revised its requirements to respond to findings for each local early intervention program. Based on this new approach, each local early intervention program was required to submit, for approval, a corrective action plan that detailed

APR Template – Part C (4)

Michigan
State

strategies that the local early intervention program was to use to correct noncompliance, as soon as possible, but no later than one year from notification of the finding, including verification by the state.

As part of the corrective action planning process, local early intervention programs are required to conduct file reviews as part of the quarterly reporting process. In addition, starting in FFY 2008, the term *improvement plan* was changed to *corrective action plan* to emphasize the importance of timely correction. When data from quarterly reports indicated correction of noncompliance, MDE required local early intervention programs to submit files to the Lead Agency for verification of correction of noncompliance. This required the local early intervention programs to submit files to the Lead Agency who uses a checklist, based on federal requirements, to verify correction of noncompliance. Local early intervention programs are notified of the verification of correction of noncompliance through a formal letter closing the corrective action plan. For those local early intervention programs who do not meet their interim targets and compliance, sanctions will be enforced which may include being focused monitored, a compliance agreement, or intensive state supervision.

During FFY 2007, Michigan was in the process of updating the Michigan Part C data system to include the collection of data regarding the 45-day timeline; details of Michigan's progress with the upgrades are provided in the discussion of the planned improvement activities in this indicator. In order to collect data for this indicator, two-thirds of the state collected data through a self assessment through the Michigan Electronic Grants System (MEGS). The other one-third of the state collected data through the Service Provider Self Review (SPSR). SPSR is part of the Continuous Improvement Monitoring System (CIMS).

Data source: Michigan Self Assessment for two-thirds of the state and Service Provider Self Review for one-third of the state.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

Michigan Part C FFY 2006 SPP/APR Response Table, regarding compliance with §§303.322(c)(3)(ii) and 303.344(a)

Michigan Part C FFY 2005 regarding compliance with §§303.322(c)(3)(ii) and 303.344(a)

Findings in FFY 2005

In the FFY 2005 APR, Michigan was unable to report the correction of findings of noncompliance because the necessary data had not been collected in the correct timeframes. Michigan's understanding of OSEP's expectations for the state's general supervision system have resulted in better collection and reporting of the necessary data for the identification and correction of findings of noncompliance beginning in FFY 2005.

Of the 19 findings given in FFY 2005, none (0) were corrected within one year of notification, including verification by the state. However, 17 of the 19 were verified for correction of noncompliance by June 2008. The two who have not verified correction of noncompliance were required, in November 2008, to update/revise their corrective action plans and turn in progress reports monthly. MDE required specific interim targets that each local early intervention program must reach by specific timeframes. These two local early intervention programs participated in a technical assistance call in October of 2008.

Local early intervention programs that have not yet corrected noncompliance were required to update/revise their corrective action plans and turn in progress reports monthly. MDE will state specific interim targets that each local early intervention program must reach by specific timeframes. The two local early intervention programs participated in a technical assistance call in October of 2008. To verify compliance, MDE will require the local early intervention programs to submit files and MDE will verify correction of noncompliance by using a checklist. Each local early intervention program will receive a letter closing the finding when compliance has been attained. Local early intervention programs who have not met their interim targets and compliance may be focused monitored, have a compliance agreement, funds designated to assist in the compliance area, or intensive state supervision. Local early

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Michigan
State

intervention programs who did not correct noncompliance were focused monitored. The focused monitoring visit allows the state to determine root causes and helps the local early intervention programs to develop and/or implement strategies to correct noncompliance.

Of the remaining two findings, one verified correction of noncompliance by January 2009.

Michigan Part C FFY 2006 regarding compliance with §§303.322(c)(3)(ii) and 303.344(a)

Findings of noncompliance from FFY 2006 and the correction rate of those findings are reported in Indicator 9 of the FFY 2007 APR; details regarding findings of noncompliance with the 45-day timeline are provided here.

Findings in FFY 2006

Of 57 local early intervention programs monitored for compliance with the 45-day timeline in FFY 2006, 29 were found to be out of compliance. Findings were issued in June 2007 and 23 of these sites were able to provide documentation of correction of noncompliance within one year. The remaining six local early intervention programs were able to show progress, but not achieve compliance within one year of notification of the finding. The six local early intervention programs were required to participate in a technical assistance in October 2008 and they were required to update/revise their corrective action plans and turn in progress reports monthly. To verify correction of noncompliance, MDE will require the local early intervention programs to submit files and MDE will verify correction of noncompliance by using the checklist based upon federal requirements. Each local early intervention program, for whom correction of noncompliance has been verified, will receive a letter closing the finding because compliance has been attained. For those local early intervention programs who do not correct noncompliance, sanctions will be issued that include focused monitoring, compliance agreements or intensive state supervision.

Of the remaining six findings, three were verified for correction of noncompliance by January 2009.

Progress/Slippage

Michigan continued to improve compliance with required evaluation and assessment and the initial IFSP meeting in FFY 2007, from 66.8% in FFY 2006 to 87.10%.

The increase in performance rate in FFY 2007 as compared to FFY 2006 (47.8%) may be attributed to a number of factors. Michigan's comprehensive system of personnel development held several trainings to ensure that local early intervention programs understood the requirements of Indicator 7. In particular, training focused on how to document exceptional family circumstances and the requirements of the 45-day timeline, specifically that within 45 days from referral, local early intervention programs must conduct an evaluation, collect health status reports, including hearing and vision, and hold the initial IFSP meeting. In addition, the state revised its requirement for identifying findings. The state also revised requirements that each local early intervention program had to accomplish. Based on this new approach, each local early intervention program was required to submit, for approval, an improvement plan that detailed strategies that the local early intervention program was required to complete in order to correct noncompliance, as soon as possible, but no later than one year from notification of the finding, including verification by the state.

As part of the improvement planning process, local early intervention programs are required to conduct file reviews as part of the quarterly reporting process. In addition, starting in FFY 2008, the term *improvement plan* was changed to *corrective action plan* to emphasize the importance of timely correction. When data from quarterly reports indicates correction of noncompliance has been met, MDE requires early intervention programs to submit files to the Lead Agency for verification of correction of noncompliance. This requires the local early intervention programs to submit files to the Lead Agency who uses a checklist, based on federal requirements, to verify correction of noncompliance. Local early intervention programs are notified of the verification of correction of noncompliance through a formal letter closing the corrective action plan. For those local early intervention programs who do not meet their interim targets and compliance, sanctions will be enforced which may include being focused monitored, a compliance agreement, or intensive state supervision.

APR Template – Part C (4)

Michigan
State

During FFY 2007, Michigan was in the process of updating the Michigan Part C data system to include the collection of data regarding providing services in a timely manner; details of Michigan's progress with the upgrades are provided in the discussion of the planned improvement activities in this indicator. In order to collect data for this indicator, two-thirds of the state collected data through a self assessment through the Michigan Electronic Grants System (MEGS). The other one-third of the state collected data through the Service Provider Self Review (SPSR). SPSR is part of the Continuous Improvement Monitoring system (CIMS).

Improvement Activities:

The following activities were included in the FFY 2006 APR and in the SPP that was updated in February 2007. An update on the progress of each activity is included.

Improvement Activities	Timelines	Resources
Activity: Through <i>Early On</i> Redesign, the system will examine whether to change the Michigan requirement of completing the initial IFSP within 45 days of referral. If the system decides to adopt OSEP's requirement (initial IFSP meeting within 45 days), the field will be made aware of the changes and the implications.	Completed	<i>Early On</i> Redesign Leadership Team MICC
Discussion: The Timely Services Reference Bulletin was updated in the spring of 2007 and again in the fall of 2007 to include the corrected definition of initial IFSP meeting as advised by OSEP. Michigan moved to the OSEP requirement for an initial meeting within 45 days of referral with an additional state requirement that the IFSP be completed within 60 days of referral.		
Activity: The Timely Services Reference Bulletin will be updated to include guidance on documenting and reporting exceptional family circumstances. It will be re-distributed to the field.	Completed	Interagency staff
Discussion: The Timely Services Reference Bulletin also included guidance to the field on documenting exceptional family circumstances. It was shared with the field in draft format in the fall of 2006.		
Activity: The Michigan Part C data system will be upgraded to ensure timely and accurate collection of utilization, outcome, and cost data for <i>Early On</i> .	2006 - 2008	Part C Administrative Structure Michigan Part C data system contractor
Discussion: In addition to general Michigan Part C data system upgrades described under Indicator 1, updates to the data system will allow Michigan to collect more precise data on this indicator. The Michigan Part C data system will require local early intervention programs to input the actual date of the receipt or completion of each portion of the evaluation and assessment process, the date of the initial IFSP meeting, the date of the completed IFSP, and also any exceptional family circumstances affecting the timeline. This will allow Michigan to notify local early intervention programs of findings in a more timely manner, report data from all 57 local early intervention programs for this indicator in the FFY 2008 APR, better analyze reasons for noncompliance, and provide additional data about the local early intervention programs.		
For the FFY 2007 APR to be submitted in February 2009, data for this indicator will be collected through the Service Provider Self Review (SPSR) and Self Assessment. One cohort of 19 local early intervention programs will complete and submit the SPSR, including child record review results, in spring 2008. The remaining two cohorts will use Self Assessment.		
Activity: The compliance portion of CIMS monitoring will address the 45-day timeline issue by collecting file review data from local early intervention programs.	Completed Winter 2007 and ongoing	CIMS contractor
The data reported to MDE will be verified on a random basis. MDE will work with NCRRC to finalize the verification process in winter 2008.		MDE

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Michigan
State

<p>Discussion: The local self assessment portion of the Continuous Improvement Monitoring System (CIMS) began in the fall of 2007. One of the three cohorts, each of which consists of 19 of the 57 local early intervention programs, completed the Service Provider Self Review (SPSR). It included a child record review of 10%, or a minimum of ten files, which includes detailed questions regarding complete, multidisciplinary and timely evaluation and assessment, the initial IFSP meeting and the completed IFSP. The SPSR provided Michigan with additional data around evaluation, assessment and the 45-day timeline as well as allowing local early intervention programs an opportunity to evaluate their own systems and implement improvement activities in a proactive manner.</p> <p>The CIMS process, beginning in April 2009, will have each local early intervention program involved in data analysis. Each local early intervention program will be required to analyze their data and if compliance is not met, complete activities. Activities include, reviewing more recent data, participating in detailed technical assistance specific to the indicator where compliance has not been attained, and pulling specific child records that the system instructs them to pull. Verification will take place approximately eight months after the finding has been released and will require local early intervention programs to pull specific records, as indicated by MDE, and send the records to MDE for verification. MDE uses a checklist, based upon federal regulation, to verify compliance. When correction of noncompliance is verified, a formal letter is sent to the local early intervention program closing the finding.</p>		
<p>Activity: A reference bulletin on the collection of vision and hearing information for the comprehensive evaluation of children will be developed and distributed to the field. It will include guidance to utilize existing hearing and vision reports from medical personnel before conducting hearing and vision screenings.</p>	<p>Completed</p>	<p>Interagency staff</p>
<p>Discussion: The hearing and vision reference bulletin was distributed in a draft form in the fall of 2006. In spring of 2008, the final version of the bulletin was provided to the field with limited edits.</p>		
<p>Activity: A state-recommended form for receiving health reports from medical personnel is being developed. A uniform process for requesting medical information may improve the completeness and timeliness of reports from health providers.</p>	<p>Completed</p>	<p>Interagency staff Community partners Appropriate Stakeholders</p>
<p>Discussion: The state has decided to recommend the use of the Health Appraisal form currently used by all licensed child care providers in Michigan. The form has been posted on Michigan's CSPD contractor website along with other state prototype forms. Local early intervention programs receiving determinations of Needs Assistance and Needs Intervention based on noncompliance with the 45-day timeline have received guidance on the use of the form as well as best practices for ensuring the receipt of health information.</p>		
<p>Activity: Analyze data measuring this indicator and develop additional improvement activities.</p>	<p>Ongoing with annual review through 2010</p>	<p>Interagency staff Part C contractors MICC Stakeholders</p>
<p>Discussion: As evidenced in the APR, analysis of data from multiple sources related to the SPP indicators helped Michigan identify issues within the field that need additional guidance or dialogue and plan opportunities related to the indicators and Michigan's system of general supervision in order to correct noncompliance.</p>		
<p>Activity: Review fiscal costs and benefits of contracting regionalized nursing services to provide health information and complete vision and hearing checks.</p>	<p>Fall 2008</p>	<p>MDE staff MICC Interagency staff Stakeholders</p>
<p>Justification: This would lower Michigan's reliance on health providers who do not consider themselves or their services a part of the Part C system, and improve the rate of receipt of health information for inclusion in the evaluation for eligibility.</p>		
<p>Activity: Conduct a one day compliance conference for <i>Early On</i> coordinators and other stakeholders around the SPP indicators and Michigan's system of general supervision.</p>	<p>Completed Summer 2007</p>	<p>MDE staff CSPD contractor</p>
<p>Justification: With the distribution of "Determinations" in 2007, local early intervention programs became very interested in the SPP indicators and the consequences of noncompliance. By sharing detailed information with them, MDE is able to reinforce the importance of collecting valid and reliable data that demonstrates compliance and/or high performance on all SPP indicators.</p>		

APR Template – Part C (4)

Michigan
State

In 2008 a webinar was held to explain the process of “Determinations” with the local early intervention programs. In addition, specific activities that were required, based upon the determination level, were explained to the local early intervention programs.		
Activity: The CSPD contractor will develop an electronic system for tracking training and technical assistance provided to local early intervention programs by the contractor staff members or the state administrators.	Winter 2008	MDE staff Interagency staff CSPD contractor Grant manager
Justification: The system will allow the CSPD contractor to provide information on training and technical assistance when requested, sorted by local early intervention program or topic. MDE will then be able to analyze this data for multiple purposes.		
Activity: MDE, state-level partners, and contractors will continue to improve communication with health professionals.	Ongoing	MDE staff Interagency staff CSPD contractor
Justification: This is another strategy for increasing the availability of health information in a timely manner for inclusion in the evaluation of eligibility.		
Activity: Update and re-distribute the reference bulletin regarding the definition of ‘central file’ and which documents are required to be a part of that file.	Completed Fall 2008	MDE staff Interagency staff CSPD contractor Michigan Part C data system contractor
Justification: The analysis of available data demonstrates the need for clarification to the field on exactly what is required to be included in each child’s central file. The requirement to keep documentation of any exceptional family circumstances in the central file will positively impact compliance with this indicator.		
Activity: Develop and distribute guidance to the field on how and when to close out referrals and track them in the Michigan Part C data system.	Completed Spring 2008	MDE staff Michigan Part C data system contractor CSPD contractor
Justification: The analysis of data shows inconsistency across local early intervention programs in inputting, tracking, and closing out referrals in the Michigan Part C data system. This is negatively affecting the state’s compliance with this indicator.		
Activity: Develop and distribute a reference bulletin focusing on the minimum follow-up to referrals when the parents are difficult to reach or the referral comes without sufficient contact information; and on what constitutes a referral.	Completed Spring 2008	MDE staff Interagency staff CSPD contractor
Justification: The analysis of data shows confusion across the state in policies and procedures regarding referrals. This is negatively affecting the state’s compliance with this indicator.		
Activity: Develop a frequently asked questions webpage that can be accessed by local early intervention programs and updated as needed by MDE.	Summer 2008 Ongoing	MDE staff (ECE&FS and OSE/EIS) Interagency staff CSPD contractor Michigan Part C data system contractor Child and family outcomes contractor
Justification: This will allow easy access to frequently asked questions to everyone in the <i>Early On</i> field and ensure that consistent answers are provided. Tracking the frequency of questions will also help the state to determine when a reference bulletin is necessary.		

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Part C State Annual Performance Report (APR) for FFY 2007**Overview of the Annual Performance Report Development:**

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C/Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- a) IFSPs with transition steps and services;
- b) Notification to LEA, if child potentially eligible for Part B; and
- c) Transition conference, if child potentially eligible for Part B.

Measurement:

- A. Percent = $\left[\frac{\text{(\# of children exiting Part C who have an IFSP with transition steps and services)}}{\text{(\# of children exiting Part C)}} \right] \text{ times } 100.$
- B. Percent = $\left[\frac{\text{(\# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred)}}{\text{(\# of children exiting Part C who were potentially eligible for Part B)}} \right] \text{ times } 100.$
- C. Percent = $\left[\frac{\text{(\# of children exiting Part C and potentially eligible for Part B where the transition conference occurred)}}{\text{(\# of children exiting Part C who were potentially eligible for Part B)}} \right] \text{ times } 100.$

FFY	Measurable and Rigorous Target
2007	100% for A, B, and C

Actual Target Data for FFY 2007: A. 95.15%, B. 100%, C. 89.34%

During FFY 2007, Michigan was in the process of updating the Michigan Part C data system to include the collection of data regarding transitions; details of Michigan's progress with the upgrades are provided in the discussion of the planned improvement activities in this indicator. In order to collect data for this indicator, two-thirds of the state collected data through a self assessment through the Michigan Electronic Grants System (MEGS). The other one-third of the state collected data through the Service Provider Self Review (SPSR). SPSR is part of the Continuous Improvement Monitoring System (CIMS). For this data collection activity, each local early intervention program was instructed to pick a representative sample of 10%, or no less than 10 children for small local early intervention programs, based on gender, ethnicity, eligibility (Part C or Part C and Michigan Special Education), and age.

APR Template – Part C (4)

Michigan
State

A. IFSP Transition Steps and Services

95.15% of transition records reviewed had a transition plan with steps and services.

510 divided by 536 = .9515 X 100 = 95.15%

Data source: Self Assessment for Cohorts 1 and 2 and Service Provider Self Review for Cohort 3

B. Notification to LEA, if child potentially eligible for Part B

Given that Michigan is a birth mandate state and the Part C local lead agency is the intermediate school district, notification from Part C is internal and takes place as the child is identified as potentially Michigan Special Education eligible at any time from birth to age three. Any child found eligible for Michigan Special Education is automatically transitioned into Part B Special Education at age three. Therefore, LEAs are notified of **100%** of children potentially eligible for Part B. Michigan Special Education Rule R 340.1721c describes the school district requirements.

C. Transition conference, if child potentially eligible for Part B

89.34% of records of children potentially eligible for Part B had a conference with all required participants.

327 divided by 366 = .8934 X 100 = 89.34%

Data source: Self Assessment for Cohorts 1 and 2 and Service Provider Self Review for Cohort 3

The increase in performance rate in FFY 2007 as compared to FFY 2006 (63.1%) may be attributed to a number of factors. Michigan's comprehensive system of personnel development held several trainings around the state to ensure that local early intervention programs understood the requirements for transition planning as well as a transition conference, for those children potentially eligible for Part B services. In particular, the training included how to document exceptional family circumstances and what must occur within the transition process. In addition, the state revised its requirement for identifying findings. The state also revised its requirements to respond to findings for each local early intervention program. Based on this new approach, each local early intervention program was required to submit, for approval, an improvement plan that detailed strategies that the local early intervention program were required to complete to correct noncompliance, as soon as possible, but no later than one year from notification of the finding, including verification by the state.

As part of the improvement planning process, local early intervention programs are required to conduct file reviews as part of the quarterly reporting process. In addition, starting in FFY 2008, the term *improvement plan* was changed to *corrective action plan* to emphasize the importance of timely correction. When data from quarterly reports indicates correction of noncompliance has been met, MDE requires early intervention programs to submit files to the Lead Agency for verification of correction of noncompliance. This requires the local early intervention programs to submit files to the Lead Agency who uses a checklist to verify correction of noncompliance. The checklist is based upon federal guidelines. Local early intervention programs are notified of the verification of correction of noncompliance through a formal letter closing the corrective action plan. For those local early intervention programs who do not meet their interim targets and compliance, sanctions will be enforced which may include being focused monitored, have a compliance agreement, funds designated to assist in the compliance area, or intensive state supervision.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

Michigan Part C FFY 2006 SPP/APR Response Table, regarding correction of noncompliance identified in FFY 2005

Michigan Part C FFY 2005 regarding compliance with §§303.322(c)(3)(ii) and 303.344(a)

Findings in FFY 2005

In the FFY 2005 APR, Michigan was unable to report the correction of findings of noncompliance because the necessary data had not been collected in the correct timeframes. Michigan's understanding of OSEP's expectations for the state's general supervision system have resulted in better collection and

APR Template – Part C (4)

Michigan
State

reporting of the necessary data for the identification and correction of findings of noncompliance beginning in FFY 2005.

Details regarding the correction of noncompliance of findings for providing a transition plan and conference for FFY 2005 are provided here.

Of the 19 service areas monitored for compliance with transitions in FFY 2005:

- A. Eight local early intervention programs were found to be out of compliance with providing IFSPs with transition steps and services. Three of those local early intervention programs were verified for correction of noncompliance within one year. In FFY 2007, four of the remaining local early intervention programs were verified for correction of noncompliance. The remaining local early intervention program was verified for correction of noncompliance in October 2008. All corrective action plans were closed.
- B. No service areas were found to be out of compliance with the notification to the LEA, if child potentially eligible for Part B.
- C. Five service areas were found to be out of compliance with providing a transition conference, if child potentially eligible for Part B. As evidenced by the Michigan Part C data system or on-site record review, two of the local early intervention programs verified correction of noncompliance within one year. In FFY 2007 two additional local early intervention programs verified correction of noncompliance with holding a transition conference, if child potentially eligible for Part B services. The remaining local early intervention program verified correction of noncompliance in October 2008.

Michigan Part C FFY 2006 regarding compliance with §§303.148(b)(4)

Findings in FFY 2006

Findings of noncompliance from FFY 2006 and the correction rate of those findings are reported in Indicator 9 of the FFY 2007 APR; details regarding findings of noncompliance with transition are provided here.

- A. Of 57 local early intervention programs monitored for compliance with providing a transition plan with steps and services, 11 were found to be out of compliance in June 2007. Ten programs were verified for correction of noncompliance within one year. The remaining local early intervention program was able to show progress, but not compliance within one year of notification of the finding. The local early intervention program was required to update/revise its corrective action plan and turn in progress reports monthly. To verify correction of noncompliance, MDE will require the local early intervention program to submit files and MDE will verify correction of noncompliance by using the checklist based upon federal requirements. Each local early intervention program, for whom correction of noncompliance has been verified, will receive a letter closing the finding.
- B. No service areas were found to be out of compliance with the notification to the LEA, if child potentially eligible for Part B.
- C. Of 57 local early intervention programs monitored for compliance with providing a transition conference, if a child is potentially eligible for Part B services, 11 were found to be out of compliance. Ten programs were verified for correction of noncompliance within one year. The local early intervention program that had not verified correction of noncompliance within one year was required to update/revise its corrective action plan and turn in progress reports monthly. To verify correction of noncompliance, MDE required the local early intervention program to submit files and MDE will verify correction of noncompliance by using the checklist based upon federal requirements. Each local early intervention program, for whom correction of noncompliance had been verified, will receive a letter closing the finding.

Of the one remaining finding, none (0) were corrected by January 2009.

Progress and Slippage

- A. Michigan has experienced a significant increase, from 73.9% in FFY 2006 to 95.15% in FFY 2007, in compliance on providing each child exiting Part C with a transition plan including steps and services. The local early intervention program that remains out of compliance with Indicator 8a was required to submit an improvement plan in December 2007 and required to submit quarterly reports, beginning March 2008, on the implementation of that plan and on data from child record reviews on recently enrolled children. Local early intervention programs will be required to submit documentation to verify that correction of noncompliance has occurred.
- B. The state has continued to be in compliance regarding the notification to the LEA of children potentially eligible for Part B.
- C. Michigan has made some improvement toward compliance in ensuring each child potentially eligible for Part B receives a transition conference, increasing from 85.5% in FFY 2006 to 89.34% in FFY 2007. The local early intervention program that remains out of compliance with Indicator 8c was required to submit an improvement plan in December 2007 and required to submit quarterly reports, beginning March 2008, on the implementation of that plan and on data from child record reviews on recently enrolled children. Local early intervention programs will be required to submit documentation to verify that correction of noncompliance has occurred.

The increase in performance rate in 8a in FFY 2007 as compared to FFY 2006 (73.9%) and in 8c in FFY 2007 as compared to FFY 2006 (85.5%) may be attributed to a number of factors. Michigan's comprehensive system of personnel development held several trainings around the state to ensure that local early intervention programs understood the requirements for transition planning as well as a transition conference, for those children potentially eligible for Part B services. In particular, training targeted how to document exceptional family circumstances and what must occur in the transition process. In addition, the state revised its requirement for identifying findings. The state also revised its requirements for response to findings from each local early intervention program. Based on this new approach, each local early intervention program was required to submit for approval, an improvement plan that detailed strategies that the local early intervention program was required to accomplish in order to correct noncompliance, as soon as possible, but no later than one year from notification of the finding, including verification by the state.

As part of the corrective action planning process, local early intervention programs are required to conduct file reviews as part of the quarterly reporting process. In addition, starting in FFY 2008, the term *improvement plan* was changed to *corrective action plan* to emphasize the importance of timely correction. When data from quarterly reports indicates correction of noncompliance has been met, MDE requires early intervention programs to submit files to the Lead Agency for verification of correction of noncompliance. This requires the local early intervention programs to submit files to the Lead Agency which uses a checklist to verify correction of noncompliance. The checklist is based upon federal guidelines. Local early intervention programs are notified of the verification of correction of noncompliance through a formal letter closing the corrective action plan.

Improvement Activities

The following activities were included in the FFY 2006 APR and in the SPP that was updated in February 2007. An update on the progress of each activity is included.

Improvement Activities	Timelines	Resources
Activity: The <i>Early On</i> system will implement the new monitoring system, CIMS, with transition as a priority area.	Completed	CIMS contractor
Discussion: Three of the five local early intervention programs identified for focused monitoring through the determination process in fall 2008 were selected in part for their noncompliance with transition activities. Their focused monitoring reports will require compliance within one year from notification. They will receive verification visits in FFY 2009.		
Activity: The <i>Early On</i> system will update and broadly disseminate written guidance regarding requirements and research-based	Completed Fall 2008	<i>Early On</i> Redesign Leadership Team MICC

APR Template – Part C (4)

Michigan
State

practices for transitioning. It will include specifics required to meet compliance for timelines, transition steps and services, and the transition conference.		National Early Childhood Transition Center Contractors Parents Advocacy organizations
Discussion: The Timely Services Reference Bulletin was distributed in December 2006 and addressed the timelines associated with transitions and exceptional family circumstances. Additionally, Michigan participated in the National Early Childhood Transition Center's recent research and received feedback from that project which will be used to develop additional guidance around transition.		
Activity: The Michigan Part C data system will be upgraded to ensure timely and accurate collection of utilization, outcome, and cost data for <i>Early On</i> .	2006 - 2008	Part C Administrative Structure Michigan Part C data system contractor
Discussion: In addition to general Michigan Part C data system upgrades described under Indicator 1, updates to the data system will allow Michigan to include details of transition planning and the date of the transition conference. In addition, the system will collect data related to exceptional family circumstances. This will allow Michigan to notify service areas of findings in a more timely manner, report compliance data for all 57 service areas for this indicator in the FFY 2008 APR to be submitted in February 2010, better analyze reasons for non-compliance, and provide additional data about the local early intervention programs. For the FFY 2007 APR, data for this indicator were collected through the Service Provider Self Review (SPSR). One cohort of 19 local early intervention programs completed and submitted the SPSR, including child record review results, in spring 2008. The other two cohorts completed and submitted a self assessment in spring 2008. The process of upgrading the Michigan Part C data system has been time and resource consuming at the state and local level. Adding fields to a web-based data collection system is approximately a three year process. One year is required to program and pilot the changes. Another year is needed to train staff and provide technical assistance to get valid and reliable data. Finally, in the third year, data will be available for reporting.		
Activity: The <i>Early On</i> system will focus on strengthening partnerships between Part C and Part B personnel at the state, ISD, and LEA levels and with community partners.	Ongoing	MDE Head Start Local early intervention programs Michigan 4C's Other community partners
Discussion: During FFY 2006, communication was increased with ISD Special Education Directors through the use of monthly conference calls with <i>Early On</i> being one of the standing agenda items. Additionally, Part C MDE staff members attended the annual ISD Special Education Monitors meeting to share Part C developments. Finally, the Office of Special Education and Early Intervention Services contracted a Part C monitoring consultant to facilitate communication between Part B and Part C at the state level. In FFY 2007, Michigan <i>Early On</i> attended multiple ISD Special Education Director meetings and developed a stakeholder group including both local <i>Early On</i> coordinators and ISD Special Education Directors to provide insight on the local ramifications of state policy and procedure changes.		
Activity: The <i>Early On</i> system will make available learning opportunities for families to partner in the transition process.	Spring 2008	Families PTI Contractors MICC/Parent Involvement Committee National Early Childhood Transition Center
Discussion: The CSPD, PTI, and parent support contractors will work together to provide a Parent Institute in spring 2008 that will provide an overview of the Part C system including parent rights throughout the process.		
Activity: Develop request for proposals for training and technical assistance contracts.	Completed	Interagency staff
Activity: Award training and technical assistance contracts.	Completed	MDE
Discussion: The Requests for Proposal for training and technical assistance and child find and public awareness were developed and awarded in FFY 2006. The revised systems began operating October 1, 2007. The previous CSPD contractor was again awarded both the training and technical assistance and the child find and public awareness contracts.		

APR Template – Part C (4)

Michigan
State

Activity: Analyze data measuring this indicator and develop additional improvement activities.	Ongoing with annual review through 2010	Interagency staff Part C contractors MICC Stakeholders
Discussion: As evidenced in the APR, analysis of data from multiple sources related to the SPP indicators helped Michigan identify issues within the field that need additional guidance or dialogue and plan opportunities related to the indicators and Michigan's system of general supervision in order to correct noncompliance.		
Activity: Michigan's CSPD contractor developed and shared a transition IFSP form that could be utilized by service areas when conducting transition planning and the transition conference. Update the form to ensure that it includes space for all transition requirements, especially steps and services and transition conferences.	Completed Fall 2007	CSPD contractor
Discussion: Local early intervention programs are required to use the state prototype or get approval from MDE for locally developed forms. This allows MDE to assure that all requirements for transition are present.		
Activity: In the past, Michigan has shared state prototype forms for permissive use by service areas. Beginning summer 2008, service areas will be required to either use the state prototype forms or submit their local forms to MDE for approval.	Completed Summer 2008	MDE staff Interagency staff CSPD contractor
Discussion: Local early intervention programs are required to use the state prototype or get approval from MDE for locally developed forms. This allows MDE to assure that all requirements for transition are present.		
Activity: Develop a new Transition training module based on the SPP indicator and the related requirements. Include the new transition form and guidance incorporating timelines and documentation of exceptional family circumstances.	Completed Fall 2007	CSPD contractor
Discussion: Michigan's CSPD contractor held multiple trainings across the state to ensure that all local early intervention programs are aware and understand the requirements for transition. The CSPD contractor also instructed local early intervention programs on how to use the new state prototype IFSP and transition forms.		

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Part C State Annual Performance Report (APR) for FFY 2007**Overview of the Annual Performance Report Development:**

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

Measurement:

Percent of noncompliance corrected within one year of identification:

- a) # of findings of noncompliance.
- b) # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

FFY	Measurable and Rigorous Target
2007	100%

Actual Target Data for FFY 2007: 83.33%

Of 66 findings made in FFY 2006, 55 (**83.33%**) corrections occurred within one year of identification of noncompliance. (55 corrections of noncompliance within 1 year divided by 66 findings= .8333 X 100 = 83.33% correction rate.)

Michigan has improved correction of noncompliance from 28% reported in the FFY 2006 APR to 85.6% reported in the 2007 APR.

Data were gathered through local self assessments and the Michigan Part C data system. Michigan did not have any findings through the dispute resolution process in FFY 2006. All findings were compiled through the state's monitoring system.

The increase in correction rate may be attributed to the state's approach to identifying findings and steps that each local early intervention program had to complete. Each local early intervention program had to submit, for approval, an improvement plan that detailed strategies that the local early intervention program was to take to correct noncompliance as soon as possible, but no later than one year from notification of the finding, including verification by the state. As part of the improvement planning process, quarterly reports were submitted. Quarterly reports required the local early intervention program to conduct file reviews. When quarterly reports indicated compliance or that a state target had been met, MDE required early intervention programs to submit files to the Lead Agency for verification of correction of noncompliance. A sample of records was sent to MDE and MDE used a checklist, based on federal regulation, to verify correction of noncompliance. Local early intervention programs are notified of the outcome of verification of correction of noncompliance through a formal letter. Starting in April 2009, CIMS-2 electronic system will direct the local early intervention program to pull randomly selected files for verification.

INDICATOR C-9 WORKSHEET

Indicator	General Supervision System Components	# of Programs Monitored in FFY 2006	a. # of Findings of noncompliance identified in FFY 2006 (7/1/06-6/30/07)	b. # Findings from a. for which correction was verified no later than one year from identification	Findings from FFY 2006 Corrected after one year.
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)	57	11	8	3
	Dispute Resolution (Complaints, due process hearings)				
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)	57	4	4	
	Dispute Resolution (Complaints, due process hearings)				
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)				
	Dispute Resolution (Complaints, due process hearings)				
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)				
	Dispute Resolution (Complaints, hearings)				
5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)	57	0	0	
6. Percent of infants and toddlers birth to 3 with IFSPs	Dispute Resolution (Complaints, hearings)				

APR Template – Part C (4)

Michigan
State

Indicator	General Supervision System Components	# of Programs Monitored in FFY 2006	a. # of Findings of noncompliance identified in FFY 2006 (7/1/06-6/30/07)	b. # Findings from a. for which correction was verified no later than one year from identification	Findings from FFY 2006 Corrected after one year.
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)	57	29	23	3
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A. IFSPs with transition steps and services	Dispute Resolution (Complaints, hearings)	57	11	10	
	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)				
	Dispute Resolution (Complaints, hearings)				
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: B. Notification to LEA, if child potentially eligible for Part B	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)	57	0	0	
	Dispute Resolution (Complaints, hearings)				
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: C. Transition conference, if child potentially eligible for Part B	Monitoring: (Self-Assessment/ Local APR, Data Review/Desk Audit/On-Site Visit, etc.)	57	11	10	
	Dispute Resolution (Complaints, hearings)				
Sum the numbers down Column a and Column b			66	55	6

Percent of noncompliance corrected within one year of identification = $55/66 \times 100 = 83.33\%$

Of the remaining 11 findings, six have verified for correction of noncompliance as of January 2009.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

Michigan Part C FFY 2006 SPP/APR Response Table regarding correction of noncompliance identified in FFY 2005:

In FFY 2005 (7/1/05-6/30/06), Michigan reported 27 findings of noncompliance. Michigan monitored 19 local early intervention programs to identify noncompliance and issue findings. Twenty of the findings were corrected within one year of notification of noncompliance. Two of the remaining seven findings of noncompliance have been verified as correcting noncompliance by January of 2009. Local early intervention programs that have not yet verified correction of noncompliance are required to update/revise their corrective action plans and turn in progress reports monthly. MDE states specific interim targets that each local early intervention program must reach by specific timeframes. Four local early intervention programs participated in a technical assistance call in October of 2008. To verify compliance, MDE will require the local early intervention programs to submit files and MDE will verify correction of noncompliance by using a checklist based upon federal regulations. Each local early intervention program will receive a letter verifying that correction of noncompliance has occurred. Local early intervention programs who have not met their interim targets and compliance may be focused monitored, have a compliance agreement, funds designated to assist in the compliance area, or intensive state supervision. Local early intervention programs who did not correct noncompliance were focused monitored. The focused monitoring visit allows the state to determine root causes and helps the local early intervention programs to develop and/or implement strategies to correct noncompliance.

In FFY 2006 (7/1/06-6/30/07) and FFY 2007 (7/1/07-6/30/08) Michigan examined compliance data from 57 local early intervention programs through multiple means, including self assessments, on-site monitoring, data verification and the Michigan Part C data system. Those data have been used to make findings of noncompliance, to require corrective action planning and additional reporting, and to select local early intervention programs for focused monitoring.

As Michigan continues to refine its new system of general supervision, the process of identifying and notifying local early intervention programs of noncompliance and then verifying correction within one year is becoming more effective and efficient. Michigan has developed a corrective action planning system, through CIMS, which mandates that local early intervention programs develop a corrective action plan for correcting noncompliance. In addition, checklists have been developed to ensure that correction of noncompliance is verified. Local early intervention programs are required to send in actual Individualized Family Service Plans (IFSPs) and the state verifies compliance using the checklist. A formal letter is sent to the local early intervention program verifying correction of noncompliance.

Details regarding program-specific activities related to uncorrected noncompliance are provided in the corresponding APR indicators. Michigan's current system of integrated monitoring is composed of three components: Focused Monitoring, Data Analysis, and Verification. Sites are chosen for focused monitoring based upon data and how the local early intervention program performed on compliance indicators as well as performance/results indicators. In addition, the state takes into account timely correction of noncompliance, timely data submission and accuracy of data submission. Sites are notified if they will be focused monitored by a formal letter stating which components are out of compliance. MDE staff visit each focused monitoring site for approximately three days. While there, record reviews are conducted as well as meeting with and asking questions of the staff and directors of the intermediate school district (ISD). At the end of the focused monitoring visit, a preliminary report is handed to the ISD. MDE staff write a formal report stating, when appropriate, that a corrective action plan must be completed and that correction of noncompliance must occur as soon as possible, but no later than one year from the date of notification of noncompliance, including verification. Approximately eight months after the focused monitoring visit, a focused monitoring follow-up visit occurs. At the focused monitoring follow-up visit another record review is completed to verify correction of noncompliance. A formal letter is then sent to the ISD with the results of that follow-up visit.

The second component of the integrated monitoring system is Data Analysis. Local early intervention programs will begin data analysis in April 2009. Each local early intervention program will receive a strand report for each compliance and results indicator. The strand report will show each local early intervention program if they are in compliance or have reached the state target for each of the following indicators: 1, 2, 5, 6, 7, and 8. When a local early intervention program is not in compliance or has not reached the state target, the CIMS-2 system will issue a finding and direct the local early intervention program to specific activities that must occur. A corrective action plan for compliance indicators and/or an improvement plan for results indicators must be developed. Interim reports will be analyzed by MDE. At the end of eight months, the state's web-based data system will instruct the local intervention program to pull randomly selected files for verification of correction of noncompliance. Local early intervention programs will then mail copies of those files to MDE/Lead Agency so that staff can conduct a verification checklist. A formal letter is then sent to the local early intervention system stating the results of the verification.

The last component of the integrated monitoring system is Verification. Verification takes place at any time. The state may choose local early intervention programs to verify data submission. A checklist was created and is used when actual files are sent to MDE for data verification.

The overview of the development of the APR and the activities explained below describe Michigan's current system of general supervision and the plans for improving it. Findings of noncompliance from FFY 2006 and the correction rate of those indicators are reported in this indicator.

Improvement Activities	Timelines	Resources
Activity: Develop Key Performance Indicators (KPIs).	Completed	MDE staff, Interagency staff National Center for Special Education Accountability Monitoring Consultant Stakeholders
<p>Discussion: In FFY 2007, one third of the local early intervention service programs completed the Service Provider Self Review (SPSR). The data gathered from that process identified findings of noncompliance and assisted the state in identifying systemic issues in the early intervention system. In FFY 2004 MDE staff and a group of stakeholders designed the framework for the CIMS for IDEA. In FFY 2005 and FFY 2006, staff began development of the Part C SPSR. The goal of the SPSR is to assist local early intervention programs to analyze data from multiple sources to improve outcomes for children and their families. In addition, the SPSR was used to measure compliance, inform the local and state stakeholders of the service area's needs, and inform corrective action planning.</p> <p>The SPSR is a team process conducted by each local service area. Each local team will complete the guided process using an electronic workbook to analyze the local data on each of the eight Key Performance Indicators (KPIs) closely aligned with the SPP indicators. Compliance and performance as an early intervention provider is examined and the results of the SPSR will direct each local corrective action plan.</p> <p>In the FFY 2004 SPP, Michigan submitted a sampling plan to be used for the pilot study for early childhood outcomes. This plan divided the 57 local early intervention programs into three representative cohorts. OSEP approved this plan. Michigan has continued to use the cohorts as a device for sampling throughout the general supervision system. Each year beginning in fall 2007, one cohort will complete the SPSR on a three-year cycle.</p>		
Activity: Perform focused monitoring activities for specific sites based on data.	Completed Ongoing	CIMS contractor MDE staff
<p>Discussion: Originally, the Focused Monitoring process was developed to select local early intervention programs for intense monitoring around only one issue based on available data. Stakeholders concluded that for Part C, the targeted issues should include natural environments, identification, and transition. In the first two years of focused monitoring, local early intervention programs were selected based on poor performance in only one of those areas and only that area was examined closely. As OSEP has clarified the importance of compliance with SPP indicators and with further guidance from NCSEAM, Michigan has made changes to the focused monitoring process. Sites are now chosen based on compliance with timely services, timely and complete evaluations, and transition. The scope has been widened so that any noncompliance found through the process is included in the findings report. Specific details of completed focused monitoring visits can be found in the individual indicator descriptions.</p>		

APR Template – Part C (4)

Michigan
State

Activity: Train CIMS staff on Part C SPSR.	Completed	MDE staff
Discussion: Training on the SPSR has been provided to MDE staff, CSPD contractor staff, and cohort 1 representatives by the CIMS contractor. The information shared at the trainings can be found at http://www.eotta.ccesa.org/CIMS/SPSR.php .		
Activity: Implement SPSR for Part C.	Fall 2007 Completed	CIMS contractor
Discussion: As Part C staff worked with the CIMS contractor to finalize the SPSR for use with the local early intervention programs, it became apparent that it had been developed explicitly for Part B. The number of changes necessary to make it useful for <i>Early On</i> made it impossible to implement beginning in fall 2006. Therefore, the decision was made to postpone the release of the process until both the CIMS contractor and MDE staff were confident that the product was efficient and effective. The additional time allowed for the development of a project team of stakeholders from the local level that was able to review the product and provide invaluable feedback. In FFY 2007, a third of the state participated in the SPSR data collection process. Results of that process identified findings and areas where local early intervention programs need assistance. Local early intervention programs were to identify areas of needed improvement and develop a plan for those areas. Local early intervention areas identified areas of compliance as well as performance areas.		
Activity: The <i>Early On</i> system will monitor progress on all five family outcomes from the ECO Center.	Fall 2009	To be determined based on tool selected for measurement.
Discussion: While Michigan has adopted all five family outcomes as developed by the ECO Center as the goal of <i>Early On</i> , current focus is on allowing local early intervention service programs to input data into the state's database. Work on this activity is on-going.		
Activity: Develop request for proposals for training, technical assistance, child find, and public awareness contracts.	Completed	Interagency staff
Activity: Award training and technical assistance and child find and public awareness contracts.	Completed	MDE staff
Discussion: The Requests for Proposal for training and technical assistance and child find and public awareness were developed and awarded during the reporting period. The revised systems began October 1, 2007. The previous CSPD contractor was again awarded both the training and technical assistance and the child find and public awareness contracts with changes made based on <i>Early On</i> Redesign, funding decreases, the SPP, and system needs. In order to focus resources on those local early intervention programs most in need of assistance, a three-tiered system of training and technical assistance was developed. This allows continued generalized assistance to high performing local early intervention programs with increased training and technical assistance provided to lower performing local early intervention programs. The lowest performing local early intervention programs will receive more intense assistance from both the CSPD contractor and MDE staff.		
Activity: Develop request for proposals (RFP) for Qualitative Compliance and Information Project contracts. Award the RFP.	Completed	Interagency staff/MDE Staff
Discussion: The Requests for Proposal for the Qualitative Compliance and Information Project (QCIP) has been awarded. The revised system began October 1, 2008. The previous QCIP contractor was again awarded the contract with changes made based on <i>Early On</i> Redesign, funding decreases, the SPP, and system needs.		
Activity: Analyze data measuring this indicator and develop additional improvement activities.	Ongoing with annual review through 2010.	Interagency staff Part C contractors MICC Stakeholders
Discussion: As evidenced in the APR, analysis of data from multiple sources related to the SPP indicators helped Michigan identify issues within the field that need additional guidance or dialogue and plan opportunities related to the indicators and Michigan's system of general supervision in order to correct noncompliance.		
Activity: Implement the third component of Michigan's system of general supervision, verification, related to focused monitoring, record review, and data review findings.	Completed Ongoing	CIMS contractor MDE staff (ECE&FS and OSE/EIS)
Discussion: As Michigan's understanding of the requirements for general supervision continues to expand, MDE staff members, working with the CIMS contractor, have been able to develop a process for verifying the correction of findings of noncompliance. Because of the higher need of those local early intervention programs selected for focused monitoring, verification of those sites will be completed by an on site visit which will consist of a record review of files and an interview with key personnel. Verification of correction of noncompliance for local early intervention programs who were not focused monitored occurs when a local early intervention program reports correction of		

APR Template – Part C (4)

Michigan
State

noncompliance on an corrective action plan. The state sends out a letter asking for a sample of actual records to be sent to the state. The state then reviews the records, based on a checklist and verifies correction of noncompliance. Once verification takes place, a letter is sent to the local early intervention program either stating they corrected noncompliance or that there has not been correction of noncompliance.		
Activity: Complete the development of and streamline the entire general supervision system for <i>Early On</i> .	Spring 2008	NCRRC MDE staff (ECE & FS and OSE/EIS) MICC
Discussion: The lack of an effective and efficient general supervision system had a negative impact on Michigan's ability to complete the FFY 2005 APR and on Michigan's determination from OSEP. Michigan will work with the assigned NCRRC representative to examine the existing system of general supervision and to make improvements to the three basic components to allow for more timely and effective monitoring, notification of noncompliance, guidance, and verification of correction of noncompliance.		
Activity: Develop a database for tracking all segments of the general supervision system: findings, corrective action plans, quarterly reports, progress, and verification of compliance, determinations, and sanctions.	Spring 2008	MDE staff CIMS contractor
Discussion: Currently Michigan is struggling to track and align all segments of the general supervision system. A database will ensure that no pieces are lost.		

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

The following activities, along with timelines and resources, have been developed to positively impact Michigan's ability to identify noncompliance and ensure its correction within one year of notification. They have also been added to the SPP which can be viewed at www.michigan.gov/earlyon.

Improvement Activities	Timelines	Resources
Activity: Develop a more effective and efficient system of tracking findings and correction of noncompliance.	Fall 2008 Ongoing	CIMS contractor MDE staff (ECE&FS and OSE/EIS)
Justification: As Michigan is tracking corrections of noncompliance it is becoming evident that a more effective system needs to be put in place to track the timeframes of correction of noncompliance. It is becoming evident that Michigan must create a database that can track corrections of noncompliance from several years.		
Activity: Train local early intervention personnel on the new CIMS-2 process.	Spring 2009 Ongoing	CIMS contractor MDE staff (ECE&FS and OSE/EIS)
Justification: Michigan has made significant changes to the CIMS process. Local early intervention programs in April 2009 will engage in a process of data analysis as opposed to a self review. Findings are embedded into the CIMS-2 process. Activities and corrective action plans and/or improvement plans are required when noncompliance is found. In order for local early intervention programs to navigate through the CIMS-2 process, training is required.		

Part C State Annual Performance Report (APR) for FFY 2007**Overview of the Annual Performance Report Development:**

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2007	100%

Actual Target Data for FFY 2007:

No Part C complaints were issued reports in FFY 2007.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

N/A

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Please see Appendix C for information on complaints, hearings, and resolutions.

Part C State Annual Performance Report (APR) for FFY 2007

Overview of the Annual Performance Report Development:

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = $[(3.2(a) + 3.2(b)) \text{ divided by } 3.2] \text{ times } 100$.

FFY	Measurable and Rigorous Target
2007	100%

Actual Target Data for FFY 2007:

No due process hearings were requested in FFY 2007.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

N/A

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Please see Appendix C for information on complaints, hearings, and resolutions.

Part C State Annual Performance Report (APR) for FFY 2007**Overview of the Annual Performance Report Development:**

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

Measurement:

Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
2007	Michigan Part C did not meet the threshold of ten hearings requests.

Actual Target Data for FFY 2007:

No Part C hearings were requested in FFY 2007.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

N/A

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Please see Appendix C for information on complaints, hearings, and resolutions.

Part C State Annual Performance Report (APR) for FFY 2007**Overview of the Annual Performance Report Development:**

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements.
(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2007	Michigan Part C did not meet the threshold of ten mediation requests.

Actual Target Data for FFY 2007:

No Part C mediations were held in FFY 2007.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

N/A

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Part C State Annual Performance Report (APR) for FFY 2007**Overview of the Annual Performance Report Development:**

See Indicator #1 (page 1).

Monitoring Priority: Effective General Supervision Part C/General Supervision

Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

State reported data, including 618 data, State Performance Plan, and Annual Performance Reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target
2007	100%

Actual Target Data for FFY 2007:

The state reported data, including 618 and the State Performance Plan and the Annual Performance Report, were each submitted on time.

The 618 data reporting child count, including race and ethnicity, were submitted by February 1, 2007.

The exiting, personnel, and dispute resolution 618 data were reported by November 1, 2007. Michigan also submitted its SPP prior to the December 2, 2005 due date and all subsequent revisions by specified due dates.

Various methods and vendors were used to collect the SPP/APR data. Data for Indicators 1, 7 and 8 were collected through self assessments. The current Michigan Part C data system was used to collect data for Indicators 2, 5, and 6. The child and family outcome information, Indicator 3 and Indicator 4, were collected by the Qualitative Compliance Information Project at Wayne State University. Data for Indicators 10, 11, and 12 are collected in the Michigan Department of Education, Office of Special Education and Early Intervention Services.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2007:

There has been discussion regarding the proposed list of changes for the data fields. Changes to the proposed data fields were initiated this program year. Additionally, the data collection contractor has also started the migration to a new web-based data system.

APR Template – Part C (4)

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Indicator 14 – SPP/APR Data

APR Indicator	Valid/Reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8A	1	1	2
8B	1	1	2
8C	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	1	1	2
13	1	1	2
		Subtotal	30
		Timely Submission Points	5
		Grand Total	35

Indicator 14 – 618 Data

Table	Timely	Complete	Passed Edit Check	Responded to Date Note Requests	Total
Table 1 – Child Count (2-1-08)	1	1	1	1	4
Table 2 – Settings (2-1-08)	1	1	1	1	4
Table 3 Exiting (11-1-08)	1	1	1	1	4
Table 4 – Dispute Resolution	1	1	1	1	4
				Subtotal	16
				Wt. Total	40

Indicator #14 Calculation

A. APR Total 35
B. 618 Total 40
C. Grand total 75

Percent of timely and accurate data = $75/75 \times 100 = 100\%$

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007

No revisions at this time.

Appendix A

Sampling

Every family recorded as participating in Part C/*Early On* as of December 1, 2007 was eligible to receive a family survey (n=9,388). The current versions of the survey were sent to families who have children in *Early On* who were between the ages of birth and three as of April 1, 2008.

For families who had more than one child in *Early On* living in the same household, one of their children was randomly selected as the ‘target’ child for the survey questions. Four hundred and ninety-five (495) families with multiple children enrolled in *Early On* were identified, reducing the initial number to 8,893.

Of the 8,893 pre-survey notification flyers that were mailed, 399 families had invalid addresses that could not be corrected and 15 children passed away. This resulted in a total mailing of 8,479 surveys in late March 2008. Of the 8,479 surveys mailed, 1,513 surveys were sent to families whose children were transitioning out of Part C; their results are not included in this report. Thus 6,966 surveys went to families with children currently enrolled in Part C/*Early On*.

- 9,388 – 495 (duplicate children) = 8,893
- 8,893 – 414 (invalid address and deceased) = 8,479 surveys mailed, including transition surveys
- 8,479 – 1,513 (transition surveys) = **6,966** surveys mailed that included the NCSEAM ‘Impact on Family’ scale for SPP indicator 4

Survey Administration

Approved Research Protocol. The Part C/*Early On* family survey data collection procedures and protocols have been extensively reviewed and approved by the Human Investigation Committee (HIC), the primary Institutional Review Board (IRB) for Wayne State University. The approved protocol includes informed consent, confidentiality, and data security.

Dual Mode Survey – Mail and Telephone. The survey was initially administered by mail, followed by a series of follow-up efforts including reminder postcards, re-mails, and telephone interviews (CATI - computer assisted telephone interviews).

Support to Non-English Respondents. Non-English speaking parents were provided the toll-free number to ask for an Arabic or Spanish-speaking interpreter to assist them in completing the survey or to answer questions about the survey.

Survey Tracking. Each survey was coded using a unique child code to allow matching the respondent to the child’s demographic information in EETRK/MI-CIS. This process allowed the inclusion of demographic characteristics of the children whose family responded to the survey.

Data Management, Quality Assurance, and Analysis

The family survey data were collected in two modes: mail survey and telephone interviews. The two modes, then, produce two distinct datasets. The mail surveys are electronically scanned into a database using optical mark recognition (OMR) software called Remark, and data are stored in SPSS (Statistical Package for Social Science). The surveys completed through CATI were collected using the Sawtooth software, which was later exported to SPSS.

In addition to the approved research protocol, rigorous measures were used to ensure data accuracy for the data collection modes – mail and telephone. Surveys received by mail and completed by telephone were verified and audited for accuracy. Detailed descriptions of procedures are available through the data collection project at Wayne State University.

APR Template – Part C (4)

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A clean and verified dataset of all respondents to the NCSEAM Impact on Family scale was sent to Avatar International LLC (a NCSEAM-approved vendor) to conduct the Rasch analysis that produced the scores for SPP indicator 4 reporting.

Representativeness / Non-Response Bias

The survey responses returned are representative of the entire Michigan Part C/*Early On* population based on child gender and age, but not based on eligibility and ethnicity as shown below. The under representation of African-American populations in the family survey has been a continuing issue since the surveys were first sent out in 1993. Many strategies have been utilized to increase the number of responses from minorities, including the availability of Spanish and Arabic interpreters, a toll-free number for English and non-English respondents, targeted follow-up mailing, and telephone interviews; further strategies will be examined for future improvement. Detailed descriptions are available through the data collection project at Wayne State University.

See Table 1 for a summary of respondents' children's demographics, with comparisons to statewide demographics.

Over three-fifths (62.7%, n=1,863) of the respondents' children were male (37.3%, n=1,106 female), which was similar to the statewide percentages of 61.4% male and 38.6% female. Also similar were respondents' children's age (9.0% children were birth to one year old, one third were one to two years old and over half (57.7%) were two to three years old) compared to the state (8.7%, 33.3%, and 58.0%, respectively).

Table 1: FFY2007 - 2008 Family Survey Respondents' Child Characteristics Compared to the State

	Family Survey (Current Participant as of April 1, 2008)	Statewide (Current Participant as of April 1, 2008)
<i>Gender</i>		
Male	62.7% (n=1,863)	61.4%
Female	37.3% (n=1,106)	38.6%
<i>Age Group</i>		
Birth to 1 year	9.0% (n= 267)	8.7%
1 to 2 years	33.3% (n=989)	33.3%
2 to 3 years	57.7% (n=1,713)	58.0%
<i>Eligibility</i>		
Part C only	56.9% (n=1,690)	62.2%*
MI Special Education	43.1% (n=1,279)	37.8%*
<i>Race of Children</i>		
White	81.9% (n=2,432)	75.5%*
Black	9.2% (n=274)	14.2%*
Hispanic	5.2% (n=154)	6.2%
Asian	1.6% (n=47)	1.9%
Native American	1.1% (n=32)	1.0%
Other/Multi-Racial	1.0% (n=30)	1.1%
<i>Total</i>	N=2,969	99.9%

* Difference between sample and statewide is statistically significant.

Comparison of the eligibility of respondents' children with the state showed that the percentage of Michigan special education eligible children was higher than the state (43.1%, n=1,279 vs. 37.8%, respectively). Also, in the Part C only children, the percentage of respondents' children (56.9%, n=1,690) was lower than the state percentage (62.2%).

Black children were under-represented in the sample (9.2% survey vs. 14.2% state) and White children were over-represented (81.9% survey vs. 75.5% state). The percentages of Hispanic children (5.2% survey vs. 6.2% statewide), Native American children (1.1% survey vs. 1.0% statewide) and Asian children (1.6% survey vs. 1.9% state) in the survey were comparable to the state.

Description of Weighting Procedure to Adjust for Eligibility and Ethnicity Representation

The distribution of eligibility and ethnicity in the survey population was not a perfect representation of the distribution found in the total Part C population. To determine if the difference made a significant impact on the findings related to Indicator 4, weights were applied to adjust the sample sizes for each ethnic and eligibility group.

Weights are commonly used to adjust survey results for under-and over-representation of specific subgroups in a sample population. Weighting provides an estimate of the results that would be found if the distribution of the ethnic and eligibility subgroups in the sample were identical to the distribution in the overall population. The result of weighting is the same as if you duplicated each Impact on Family score by as many times as the weight and then computed the average score.

Creation of Weights Based on Racial Distribution

Weights were calculated by dividing the proportion of each of the subgroup in the Part C population by the corresponding proportion in the sample¹. For example, in the Part C population the proportion of children identified as white was .759. In the survey sample, the proportion of white children was .821. Dividing .759 by .821 yields 0.92. Therefore, the weight assigned to white children was 0.92. The proportion of Black or African American children in the population was .142 but in the survey sample it was .092, making the weight 1.54. This computation was repeated for the remaining racial and ethnic groups: American Indian, Asian American, Native Hawaiian or other Pacific Islander and Hispanic. The following table indicates the actual weights used in the analysis.

Table 2: Calculation of Weights

	Col A	Col B	Col C	Col D	Col B/Col D
	Population N*	Proportion of Population	Sample n**	Proportion of Sample	Weight
<i>Ethnicity</i>					
Black	1,037	.142	274	.092	1.54
White	5,516	.755	2,432	.819	0.92
<i>Eligibility</i>					
Part C only	4,546	0.622	1,690	0.569	1.09
MI Special Education	2,761	0.378	1,279	0.431	0.88

* Current families as of April 01, 2008, excluding Transition Families.

** Includes only respondents with scores on the Impact on Family Measure.

¹ Children who were eligible for Transition were not included because they were not included in the calculation of Impact scores.

In Table 3, original results and results after weighting are presented below; there is virtually no difference in the scores after weighting. It suggests that even if the sample is not representative in terms of ethnicity and eligibility; this does not affect the SPP4 results.

Table 3: SPP4 results before and after weighting

	Un-weighted		Weighted by ethnicity		Weighted by eligibility	
	n	%	n	%	n	%
SPP 4A	1669	56.2%	1663	56.0%	1668	56.2%
SPP 4B	1505	50.7%	1498	50.5%	1501	50.6%
SPP 4C	2147	72.3%	2144	72.3%	2144	72.2%
	mean	standard deviation	mean	standard deviation	mean	standard deviation
Overall SPP 4	599.14	153.57	598.70	153.33	599.05	153.46

Discussion of FFY 2007 Data

NCSEAM's Impact of Early Intervention Services on Your Family Scale (IFS) has two important qualities necessary for use as a measure of SPP Indicator 4: validity and high reliability.

Validity. The scale has evidence for both content and construct validity. Content validity refers to the extent the items in the instrument reflect the intended domain. To ensure good content validity, the items in the scale were suggested by parents and other key stakeholders in early intervention and special education and then reviewed by experts in the field. Rasch analysis was used to ensure the items formed a unidimensional scale so that all items address the same construct. Construct validity was established by demonstrating that the IFS correlated highly with the NCSEAM Family-Centered Services Scale as expected.

Reliability. The IFS also has consistently shown a high level of reliability (i.e., reliability coefficients above .90). In the NCSEAM pilot study the IFS had a reliability coefficient of .90. The reliability coefficient found by Avatar International in Michigan's administration of the scale was 0.94 in the 2006 Family Survey, 0.99 in the 2007 survey and 0.94 in the 2008 survey. Another form of reliability is assessed by the margin of error or confidence interval. Using a 95% confidence interval, the margin of error in FFY2007 was ± 5.5 . In FY2006 the margin of error was ± 6.1 , and in FY2005 the margin of error was ± 5.9 .

In FFY2007, Michigan's average score on the Impact Scale was 599 with a Confidence Interval (CI) of 594-604. This is a decrease from the average score of 606 (CI=600-612) in FFY 2006 but was close to the findings in FFY 2005 (average= 598, CI = 592-604). The decrease in the average score coincided with overall decreases in the percentage of families who met or exceeded the three Indicator values. This year, there was a 3% decrease from last year for both Indicator 4B (51% vs. 54%, respectively) and Indicator 4C (72% vs. 75%) and a 2% decrease in Indicator 4A (56% vs. 58%). As found in previous years, more Michigan families reached and exceeded the standard for Indicator 4C (helping their child develop and learn (72%), than with the survey items for Indicator 4B (effectively communicating their child's needs, 51%) or Indicator 4A (know their rights, 56%). This finding is consistent with the calibration of the items on the survey and the understanding that we would find that more families agreed with items with lower calibrations.

Michigan's mean of 599 corresponds to survey items with fairly high calibrations (across the 22 items on the scale), which could indicate that Michigan's early intervention services are having a relatively high impact on families and that Michigan is already accomplishing the items with lower calibrations. Despite these implications the fact remains that only about half of the families responding to the survey report that they know their rights, or can effectively communicate their child's needs, indicating need for both maintenance and improvement activities related to family outcomes.

APR Template – Part C (4)

Michigan
State

The Standard Deviation of 153.57 indicates a large range of responses to the survey, possibly indicating great variance in what families are experiencing in early intervention. This is another area of improvement, especially in working toward more consistent implementation of the basic components of early intervention across the entire system (understanding rights, communicating children's needs) that contribute to achievement of family outcomes.

Appendix B

Copies of 2008 Family Survey Forms A, B, and C

Form A

Early On[®] / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form A



Family Questionnaire

Please FILL IN circles like this ●, not ✕ or ⊗. You can use a pen or pencil.
Please think about your child whose initials are _____. Consider this child in answering the questions.

	(For each question, please FILL IN <u>ONE</u> circle)					
	Don't know	Not at all	Slightly	Somewhat	Greatly	Completely
1. My child has special needs that affect his or her:						
a. Mental or intellectual development – <i>ability to learn new things or to use learned skills.</i>	①	②	③	④	⑤	⑥
b. Physical mobility – <i>ability to move around or do things without the help of others.</i>	①	②	③	④	⑤	⑥
c. Ability to communicate with others – <i>talk with and understand other people.</i>	①	②	③	④	⑤	⑥
d. Social/emotional development – <i>ability to interact with other people and to manage/express emotions.</i>	①	②	③	④	⑤	⑥
e. Senses, such as hearing or vision.	①	②	③	④	⑤	⑥
f. Adaptive development – <i>self-help behaviors such as eating, drinking, dressing, or toileting.</i>	①	②	③	④	⑤	⑥
g. Health/medical condition.	①	②	③	④	⑤	⑥

2. I was referred to *Early On* by.....(Please FILL IN ONE circle)

- | | |
|---|--|
| <p>(A) Intermediate School District / local school district</p> <p>(B) Department of Human Services</p> <p>(C) Community Mental Health</p> <p>(D) Public Health/ Health Department</p> <p>(E) Hospital</p> <p>(F) Doctor/ Nurse</p> | <p>(G) Family or Self</p> <p>(H) Friend or Neighbor</p> <p>(I) Child Care Provider</p> <p>(J) Don't remember</p> <p>(K) Other (please describe): _____</p> |
|---|--|

	(For each question, please FILL IN <u>ONE</u> circle)					
	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
3. I was offered help I needed, such as child care or transportation, to participate in the Individualized Family Service Plan (IFSP) meeting(s).	①	②	③	④	⑤	⑥
4. I was asked whether I wanted help in dealing with stressful situations.	①	②	③	④	⑤	⑥
5. I was given choices concerning my family's services and supports.	①	②	③	④	⑤	⑥

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form A

(For each question, please FILL IN ONE circle)

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
6. My family's daily routines were considered when planning for my child's services.	①	②	③	④	⑤	⑥
7. I have felt part of the team when meeting to discuss my child.	①	②	③	④	⑤	⑥
8. The services on our IFSP have been provided in a timely way.	①	②	③	④	⑤	⑥
My family was given information about:						
9. modifications of routines, activities, and the physical setting that would help my child.	①	②	③	④	⑤	⑥
10. the rights of parents regarding Early Intervention services.	①	②	③	④	⑤	⑥
11. community programs that are open to all children.	①	②	③	④	⑤	⑥
12. organizations that offer support for parents of children with disabilities.	①	②	③	④	⑤	⑥
13. how to participate in different programs and services in the community.	①	②	③	④	⑤	⑥
14. opportunities for my child to play with other children.	①	②	③	④	⑤	⑥
15. how to advocate for my child and my family.	①	②	③	④	⑤	⑥
16. who to call if I am not satisfied with the services my child receives.	①	②	③	④	⑤	⑥
Someone from Early On:						
17. helped me get services like child care, transportation, respite care, or food stamps.	①	②	③	④	⑤	⑥
18. helped me get in touch with other parents for help and support.	①	②	③	④	⑤	⑥
19. asked whether the services my family was receiving were meeting our needs.	①	②	③	④	⑤	⑥
20. went out into the community with me and my child to help us get involved in community activities and services.	①	②	③	④	⑤	⑥
The Early On service provider(s) that work with my child:						
21. are dependable.	①	②	③	④	⑤	⑥
22. are easy for me to talk to about my child and my family.	①	②	③	④	⑤	⑥
23. are good at working with my family.	①	②	③	④	⑤	⑥
24. My service coordinator is available to speak with me on a regular basis.	①	②	③	④	⑤	⑥
25. My service coordinator is knowledgeable and professional.	①	②	③	④	⑤	⑥

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form A

(For each question, please FILL IN ONE circle)

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
26. Written information I receive is written in an understandable way.	①	②	③	④	⑤	⑥
27. I was given information to help me prepare for my child's transition.	①	②	③	④	⑤	⑥
Over the past year, Early On services have helped me and/or my family:						
28. participate in typical activities for children and families in my community.	①	②	③	④	⑤	⑥
29. know about services in the community.	①	②	③	④	⑤	⑥
30. improve my family's quality of life.	①	②	③	④	⑤	⑥
31. know where to go for support to meet my child's needs.	①	②	③	④	⑤	⑥
32. know where to go for support to meet my family's needs.	①	②	③	④	⑤	⑥
33. get the services that my child and family need.	①	②	③	④	⑤	⑥
34. feel more confident in my skills as a parent.	①	②	③	④	⑤	⑥
35. keep up friendships for my child and family.	①	②	③	④	⑤	⑥
36. make changes in family routines that will benefit my child with special needs.	①	②	③	④	⑤	⑥
37. be more effective in managing my child's behavior.	①	②	③	④	⑤	⑥
38. do activities that are good for my child even in times of stress.	①	②	③	④	⑤	⑥
39. feel that I can get the services and supports that my child and family need.	①	②	③	④	⑤	⑥
40. understand how the Early Intervention system works.	①	②	③	④	⑤	⑥
41. be able to evaluate how much progress my child is making.	①	②	③	④	⑤	⑥
42. feel that my child will be accepted and welcomed in the community.	①	②	③	④	⑤	⑥
43. feel that my family will be accepted and welcomed in the community.	①	②	③	④	⑤	⑥
44. communicate more effectively with the people who work with my child and family.	①	②	③	④	⑤	⑥
45. understand the roles of the people who work with my child and family.	①	②	③	④	⑤	⑥
46. know about my child's and family's rights concerning Early Intervention services.	①	②	③	④	⑤	⑥
47. do things with and for my child that are good for my child's development.	①	②	③	④	⑤	⑥
48. understand my child's special needs.	①	②	③	④	⑤	⑥
49. feel that my efforts are helping my child.	①	②	③	④	⑤	⑥

Wayne State University / Center for Urban Studies

3

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form A

Early On staff may have assessed or evaluated the kinds of services and supports your family needed by gathering information about your family. The questions below are about this process. Please rate how strongly you agree/disagree with the following statements.

(For each question, please FILL IN ONE circle)

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
50. During this assessment and information gathering stage, the <i>Early On</i> staff asked for my family's involvement.	(1)	(2)	(3)	(4)	(5)
51. Assessments are respectful of my family and my culture.	(1)	(2)	(3)	(4)	(5)
52. Assessments of my child and family are done promptly.	(1)	(2)	(3)	(4)	(5)
53. I am asked appropriate questions about the needs of my child and family.	(1)	(2)	(3)	(4)	(5)
54. The people who ask me about my child's needs seem to know what they are talking about.	(1)	(2)	(3)	(4)	(5)

Staff are expected to work with families to write a plan of action, called the Individualized Family Service Plan (IFSP). Sometimes this is called a "Service Plan." The IFSP is an agreement about what types of services a family will get. It may help you to answer the following questions if you have a copy of your IFSP. However, you do not need an IFSP to answer the questions.

	Yes	No	Don't Know
55. My family had a meeting to write our Individualized Family Service Plan (IFSP).	(Y)	(N)	(?)
	Please go to question 56 below.	Please go to question 66 on page 5. SKIP questions 56 through 65.	Please go to question 66 on page 5. SKIP questions 56 through 65.

(Please FILL IN ONE circle)

56. The amount of time between my first contact with (or referral to) <i>Early On</i> and my family's <u>first</u> IFSP meeting was:	(A) less than 15 days	(D) 46 to 60 days
	(B) 15 to 30 days	(E) more than 60 days
	(C) 31 to 45 days	(F) don't know / don't remember

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
57. Overall, I was satisfied with my family's <u>most recent</u> IFSP meeting.	(1)	(2)	(3)	(4)	(5)
58. I received all services listed on my family's IFSP within 30 days of our consent to services.	(1)	(2)	(3)	(4)	(5)
59. The services on my family's IFSP have been provided in a timely manner.	(1)	(2)	(3)	(4)	(5)
60. My family was not fully informed of our rights when we agreed to the IFSP process.	(1)	(2)	(3)	(4)	(5)
61. The IFSP is keeping up with my family's changing needs.	(1)	(2)	(3)	(4)	(5)
62. When I (or one of my family members) say something about my <u>child's</u> needs, it is considered in the development of the IFSP.	(1)	(2)	(3)	(4)	(5)

APR Template – Part C (4)

Michigan
State

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form A

(For each question, please FILL IN ONE circle)

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
63. When I (or one of my family members) say something about my <u>family's</u> needs, it is considered in the development of the IFSP.	(1)	(2)	(3)	(4)	(5)
	Terrible	Poor	Fair	Good	Excellent
64. The quality of services my family has received as a result of the IFSP has been.....	(1)	(2)	(3)	(4)	(5)
65. My IFSP has been changed or updated..... (Please FILL IN ONE circle)	(A) every 6 months		(D) not at all		
	(B) every year		(E) don't know		
	(C) whenever I meet with my Service Coordinator		(F) other (please describe)		

The following statements are about ALL OF THE SERVICES your family receives.

(For each question, please FILL IN ONE circle)

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
66. There are services that my family needs that we do <u>not</u> get.	(1)	(2)	(3)	(4)	(5)
67. The services we get meet our needs.	(1)	(2)	(3)	(4)	(5)
68. My family had to wait too long after asking for a service before actually getting it.	(1)	(2)	(3)	(4)	(5)
69. The services we received took into account my whole family, not just our child with special needs.	(1)	(2)	(3)	(4)	(5)
70. Service providers allowed my family the right to choose or refuse services.	(1)	(2)	(3)	(4)	(5)
71. My child gets services in our home or wherever she/he spends most of her/his time.	(1)	(2)	(3)	(4)	(5)
72. My child receives services in settings we prefer.	(1)	(2)	(3)	(4)	(5)
73. My child's services are planned so that they fit with my family's normal schedule.	(1)	(2)	(3)	(4)	(5)
74. My child's services are planned so one service does not get in the way of another.	(1)	(2)	(3)	(4)	(5)
75. My child receives services in settings where children without special needs participate.	(1)	(2)	(3)	(4)	(5)
	Less than the school year	About the same	More than the school year	No services received during the summer	
76. Compared to the school year, the number of services my child receives during the summer is:	(1)	(2)	(3)	(4)	
	Terrible	Poor	Fair	Good	Excellent
77. How would you rate the services in helping improve your ability to care for your child?	(1)	(2)	(3)	(4)	(5)

Wayne State University / Center for Urban Studies

5

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form A

This part of the questionnaire asks your opinions about possible impacts of *Early On* on your child.

(For each question, please FILL IN ONE circle)

Early On has...	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
78. helped our child's mental or intellectual development – <i>ability to learn new things or to use learned skills.</i>	①	②	③	④	⑤
79. helped our child's physical mobility – <i>ability to move around or do things without the help of others.</i>	①	②	③	④	⑤
80. helped our child's ability to communicate with others – <i>talk with and understand other people.</i>	①	②	③	④	⑤
81. helped our child's social/emotional development – <i>ability to interact with other people and to manage/express emotions.</i>	①	②	③	④	⑤
82. helped our child's senses, such as hearing or vision.	①	②	③	④	⑤
83. helped our child's adaptive development – <i>self-help behaviors such as eating, drinking, dressing, or toileting.</i>	①	②	③	④	⑤
84. helped our child's health/medical condition.	①	②	③	④	⑤
85. <u>not</u> really helped our <u>child</u> .	①	②	③	④	⑤

Now, we would like to ask you some final questions about your family.86. Please select your relationship to the child: (Please FILL IN ONE circle that best applies):

- ☐ (A) Mother ☐ (C) Grandparent ☐ (E) Other Caregiver: _____
☐ (B) Father ☐ (D) Other Relative

87. Please select the ethnic identity category that best describes how you identify yourself: (Please FILL IN ONE circle that best applies):

- ☐ (A) White/ Non-Hispanic White ☐ (C) Arab/ Arab-American ☐ (E) Hispanic/ Latino
☐ (B) African American/ Black ☐ (D) Asian/ Pacific Islander ☐ (F) Native American/ American Indian
☐ (G) Other: _____

88. What was your family's total income for 2007? (Please FILL IN ONE circle that best applies)

- ☐ (A) Under \$10,000 ☐ (C) \$15,000 to \$24,999 ☐ (E) \$35,000 to \$49,999 ☐ (G) \$75,000 and over
☐ (B) \$10,000 to \$14,999 ☐ (D) \$25,000 to \$34,999 ☐ (F) \$50,000 to \$74,999 ☐ (H) No answer

THANK YOU for taking time to fill out the *Early On* Family Questionnaire

Please return it to us in the self-addressed envelope or to:

Dr. Lyke Thompson
Wayne State University
Center for Urban Studies
656 W. Kirby, #3040 FAB
Detroit, MI 48202

Form B

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form B



Family Questionnaire

Please FILL IN circles like this ●, not ✕ or ⚪. You can use a pen or pencil.
Please think about your child whose initials are _____. Consider this child in answering the questions.

	(For each question, please FILL IN <u>ONE</u> circle)					
	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
1. I was offered help I needed, such as child care or transportation, to participate in the Individualized Family Service Plan (IFSP) meeting(s).	①	②	③	④	⑤	⑥
2. I was asked whether I wanted help in dealing with stressful situations.	①	②	③	④	⑤	⑥
3. I was given choices concerning my family's services and supports.	①	②	③	④	⑤	⑥
4. My family's daily routines were considered when planning for my child's services.	①	②	③	④	⑤	⑥
5. I have felt part of the team when meeting to discuss my child.	①	②	③	④	⑤	⑥
6. The services on our IFSP have been provided in a timely way.	①	②	③	④	⑤	⑥
My family was given information about:						
7. modifications of routines, activities, and the physical setting that would help my child.	①	②	③	④	⑤	⑥
8. the rights of parents regarding Early Intervention services.	①	②	③	④	⑤	⑥
9. community programs that are open to all children.	①	②	③	④	⑤	⑥
10. organizations that offer support for parents of children with disabilities.	①	②	③	④	⑤	⑥
11. how to participate in different programs and services in the community.	①	②	③	④	⑤	⑥
12. opportunities for my child to play with other children.	①	②	③	④	⑤	⑥
13. how to advocate for my child and my family.	①	②	③	④	⑤	⑥
14. who to call if I am not satisfied with the services my child receives.	①	②	③	④	⑤	⑥
Someone from Early On:						
15. helped me get services like child care, transportation, respite care, or food stamps.	①	②	③	④	⑤	⑥
16. helped me get in touch with other parents for help and support.	①	②	③	④	⑤	⑥

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form B

(For each question, please FILL IN ONE circle)

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
Someone from Early On:						
17. asked whether the services my family was receiving were meeting our needs.	①	②	③	④	⑤	⑥
18. went out into the community with me and my child to help us get involved in community activities and services.	①	②	③	④	⑤	⑥
The Early On service provider(s) that work with my child:						
19. are dependable.	①	②	③	④	⑤	⑥
20. are easy for me to talk to about my child and my family.	①	②	③	④	⑤	⑥
21. are good at working with my family.	①	②	③	④	⑤	⑥
22. My service coordinator is available to speak with me on a regular basis.	①	②	③	④	⑤	⑥
23. My service coordinator is knowledgeable and professional.	①	②	③	④	⑤	⑥
24. Written information I receive is written in an understandable way.	①	②	③	④	⑤	⑥
25. I was given information to help me prepare for my child's transition.	①	②	③	④	⑤	⑥
Over the past year, Early On services have helped me and/or my family:						
26. participate in typical activities for children and families in my community.	①	②	③	④	⑤	⑥
27. know about services in the community.	①	②	③	④	⑤	⑥
28. improve my family's quality of life.	①	②	③	④	⑤	⑥
29. know where to go for support to meet my child's needs.	①	②	③	④	⑤	⑥
30. know where to go for support to meet my family's needs.	①	②	③	④	⑤	⑥
31. get the services that my child and family need.	①	②	③	④	⑤	⑥
32. feel more confident in my skills as a parent.	①	②	③	④	⑤	⑥
33. keep up friendships for my child and family.	①	②	③	④	⑤	⑥
34. make changes in family routines that will benefit my child with special needs.	①	②	③	④	⑤	⑥
35. be more effective in managing my child's behavior.	①	②	③	④	⑤	⑥
36. do activities that are good for my child even in times of stress.	①	②	③	④	⑤	⑥
37. feel that I can get the services and supports that my child and family need.	①	②	③	④	⑤	⑥

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form B

(For each question, please FILL IN ONE circle)

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
Over the past year, Early On services have helped me and/or my family:						
38. understand how the Early Intervention system works.	1	2	3	4	5	6
39. be able to evaluate how much progress my child is making.	1	2	3	4	5	6
40. feel that my child will be accepted and welcomed in the community.	1	2	3	4	5	6
41. feel that my family will be accepted and welcomed in the community.	1	2	3	4	5	6
42. communicate more effectively with the people who work with my child and family.	1	2	3	4	5	6
43. understand the roles of the people who work with my child and family.	1	2	3	4	5	6
44. know about my child's and family's rights concerning Early Intervention services.	1	2	3	4	5	6
45. do things with and for my child that are good for my child's development.	1	2	3	4	5	6
46. understand my child's special needs.	1	2	3	4	5	6
47. feel that my efforts are helping my child.	1	2	3	4	5	6

Early On staff may have assessed or evaluated the kinds of services and supports your family needed by gathering information about your family. The questions below are about this process. Please rate how strongly you agree/disagree with the following statements.

(For each question, please FILL IN ONE circle)

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
48. During this assessment and information gathering stage, the <i>Early On</i> staff asked for my family's involvement.	1	2	3	4	5
49. Evaluations were conducted at a <u>time</u> that was convenient for my family.	1	2	3	4	5
50. Evaluations were conducted at a <u>place</u> that was convenient for my family.	1	2	3	4	5
Prior to my family's evaluation, we were given an introduction to:					
51. <i>Early On</i>	1	2	3	4	5
52. The evaluation process.	1	2	3	4	5
53. Types of services available in <i>Early On</i> .	1	2	3	4	5

Staff are expected to work with families to write a plan of action, called the Individualized Family Service Plan (IFSP). Sometimes this is called a "Service Plan." The IFSP is an agreement about what types of services a family will get.

It may help you to answer the following questions if you have a copy of your IFSP. However, you do not need an IFSP to answer the questions.

	Yes	No	Don't Know
54. My family had a meeting to write our Individualized Family Service Plan (IFSP).	(Y)	(N)	(7)
	Please go to question 55 below.	Please go to question 58 below. SKIP questions 55 through 57.	Please go to question 58 below. SKIP questions 55 through 57.

(Please FILL IN ONE circle)

55. The amount of time between my first contact with (or referral to) <i>Early On</i> and my family's <u>first</u> IFSP meeting was:	(A) less than 15 days	(D) 46 to 60 days
	(B) 15 to 30 days	(E) more than 60 days
	(C) 31 to 45 days	(F) don't know / don't remember

(For each question, please FILL IN ONE circle)

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
56. I received all services listed on my family's IFSP within 30 days of our consent to services.	(1)	(2)	(3)	(4)	(5)
57. Overall, I was satisfied with my family's <u>most recent</u> IFSP meeting.	(1)	(2)	(3)	(4)	(5)
58. My child gets services in our home or wherever she/he spends most of her/his time.	(1)	(2)	(3)	(4)	(5)
59. The people who work with my child provide me with information and training so I can help my child on lots of different ways.	(1)	(2)	(3)	(4)	(5)
60. My child's services are planned so that they fit with my family's normal schedule.	(1)	(2)	(3)	(4)	(5)
61. My child receives services in settings where children without special needs participate.	(1)	(2)	(3)	(4)	(5)
62. I know where to get information about my rights regarding <i>Early On</i> .	(1)	(2)	(3)	(4)	(5)

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form B

63. Is English your native language?

Yes

No

①

②

Please go
to question
64 below.Please go
to question
63b below.63b. Did you receive information in your native
language?

Yes

No

①

②

Now, we would like to ask you some final questions about your family.64. Please select your relationship to the child: (Please FILL IN ONE circle that best applies):

Ⓐ Mother

Ⓒ Grandparent

Ⓔ Other Caregiver: _____

Ⓑ Father

Ⓓ Other Relative

65. Please select the ethnic identity category that best describes how you identify yourself: (Please FILL IN ONE circle that best applies):

Ⓐ White/ Non-Hispanic White

Ⓒ Arab/ Arab-American

Ⓔ Hispanic/ Latino

Ⓑ African American/ Black

Ⓓ Asian/ Pacific Islander

Ⓕ Native American/ American Indian

Ⓖ Other: _____

66. What was your family's total income for 2007? (Please FILL IN ONE circle that best applies)

Ⓐ Under \$10,000

Ⓒ \$15,000 to \$24,999

Ⓔ \$35,000 to \$49,999

Ⓖ \$75,000 and over

Ⓑ \$10,000 to \$14,999

Ⓓ \$25,000 to \$34,999

Ⓕ \$50,000 to \$74,999

Ⓗ No answer

THANK YOU for taking time to fill out the *Early On* Family Questionnaire

Please return it to us in the self-addressed envelope or to:

Dr. Lyke Thompson
Wayne State University
Center for Urban Studies
656 W. Kirby, #3040 FAB
Detroit, MI 48202

Form C

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form C



Family Questionnaire

Please FILL IN circles like this ●, not ✕ or ○. You can use a pen or pencil.
Please think about your child whose initials are _____. Consider this child in answering the questions.

	(For each question, please FILL IN ONE circle)					
	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
1. I was offered help I needed, such as child care or transportation, to participate in the Individualized Family Service Plan (IFSP) meeting(s).	①	②	③	④	⑤	⑥
2. I was asked whether I wanted help in dealing with stressful situations.	①	②	③	④	⑤	⑥
3. I was given choices concerning my family's services and supports.	①	②	③	④	⑤	⑥
4. My family's daily routines were considered when planning for my child's services.	①	②	③	④	⑤	⑥
5. I have felt part of the team when meeting to discuss my child.	①	②	③	④	⑤	⑥
6. The services on our IFSP have been provided in a timely way.	①	②	③	④	⑤	⑥
My family was given information about:						
7. modifications of routines, activities, and the physical setting that would help my child.	①	②	③	④	⑤	⑥
8. the rights of parents regarding Early Intervention services.	①	②	③	④	⑤	⑥
9. community programs that are open to all children.	①	②	③	④	⑤	⑥
10. organizations that offer support for parents of children with disabilities.	①	②	③	④	⑤	⑥
11. how to participate in different programs and services in the community.	①	②	③	④	⑤	⑥
12. opportunities for my child to play with other children.	①	②	③	④	⑤	⑥
13. how to advocate for my child and my family.	①	②	③	④	⑤	⑥
14. who to call if I am not satisfied with the services my child receives.	①	②	③	④	⑤	⑥
Someone from Early On:						
15. helped me get services like child care, transportation, respite care, or food stamps.	①	②	③	④	⑤	⑥
16. helped me get in touch with other parents for help and support.	①	②	③	④	⑤	⑥

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form C

(For each question, please FILL IN ONE circle)

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
Someone from Early On:						
17. asked whether the services my family was receiving were meeting our needs.	①	②	③	④	⑤	⑥
18. went out into the community with me and my child to help us get involved in community activities and services.	①	②	③	④	⑤	⑥
The Early On service provider(s) that work with my child:						
19. are dependable.	①	②	③	④	⑤	⑥
20. are easy for me to talk to about my child and my family.	①	②	③	④	⑤	⑥
21. are good at working with my family.	①	②	③	④	⑤	⑥
22. My service coordinator is available to speak with me on a regular basis.	①	②	③	④	⑤	⑥
23. My service coordinator is knowledgeable and professional.	①	②	③	④	⑤	⑥
24. Written information I receive is written in an understandable way.	①	②	③	④	⑤	⑥
25. I was given information to help me prepare for my child's transition.	①	②	③	④	⑤	⑥
Over the past year, Early On services have helped me and/or my family:						
26. participate in typical activities for children and families in my community.	①	②	③	④	⑤	⑥
27. know about services in the community.	①	②	③	④	⑤	⑥
28. improve my family's quality of life.	①	②	③	④	⑤	⑥
29. know where to go for support to meet my child's needs.	①	②	③	④	⑤	⑥
30. know where to go for support to meet my family's needs.	①	②	③	④	⑤	⑥
31. get the services that my child and family need.	①	②	③	④	⑤	⑥
32. feel more confident in my skills as a parent.	①	②	③	④	⑤	⑥
33. keep up friendships for my child and family.	①	②	③	④	⑤	⑥
34. make changes in family routines that will benefit my child with special needs.	①	②	③	④	⑤	⑥
35. be more effective in managing my child's behavior.	①	②	③	④	⑤	⑥
36. do activities that are good for my child even in times of stress.	①	②	③	④	⑤	⑥
37. feel that I can get the services and supports that my child and family need.	①	②	③	④	⑤	⑥

(For each question, please FILL IN ONE circle)

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
Over the past year, Early On services have helped me and/or my family:						
38. understand how the Early Intervention system works.	(1)	(2)	(3)	(4)	(5)	(6)
39. be able to evaluate how much progress my child is making.	(1)	(2)	(3)	(4)	(5)	(6)
40. feel that my child will be accepted and welcomed in the community.	(1)	(2)	(3)	(4)	(5)	(6)
41. feel that my family will be accepted and welcomed in the community.	(1)	(2)	(3)	(4)	(5)	(6)
42. communicate more effectively with the people who work with my child and family.	(1)	(2)	(3)	(4)	(5)	(6)
43. understand the roles of the people who work with my child and family.	(1)	(2)	(3)	(4)	(5)	(6)
44. know about my child's and family's rights concerning Early Intervention services.	(1)	(2)	(3)	(4)	(5)	(6)
45. do things with and for my child that are good for my child's development.	(1)	(2)	(3)	(4)	(5)	(6)
46. understand my child's special needs.	(1)	(2)	(3)	(4)	(5)	(6)
47. feel that my efforts are helping my child.	(1)	(2)	(3)	(4)	(5)	(6)

Early On staff may have assessed or evaluated the kinds of services and supports your family needed by gathering information about your family. The questions below are about this process. Please rate how strongly you agree/disagree with the following statement.

(For each question, please FILL IN ONE circle)

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
48. During this assessment and information gathering stage, the Early On staff asked for my family's involvement.	(1)	(2)	(3)	(4)	(5)

Staff are expected to work with families to write a plan of action, called the Individualized Family Service Plan (IFSP). Sometimes this is called a "Service Plan." The IFSP is an agreement about what types of services a family will get. It may help you to answer the following questions if you have a copy of your IFSP. However, you do not need an IFSP to answer the questions.

	Yes	No	Don't Know
49. My family had a meeting to write our Individualized Family Service Plan (IFSP).	(Y)	(N)	(?)
	Please go to question 50 on page 4.	Please go to question 52 on page 4. SKIP questions 50 and 51.	Please go to question 52 on page 4. SKIP questions 50 and 51.

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form C

(For each question, please FILL IN ONE circle)

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
50. Overall, I was satisfied with my family's <u>most recent</u> IFSP meeting.	(1)	(2)	(3)	(4)	(5)
51. I received all services listed on my family's IFSP within 30 days of consent to services.	(1)	(2)	(3)	(4)	(5)
52. My child's services are scheduled so that one service does not get in the way of another.	(1)	(2)	(3)	(4)	(5)
53. My child gets services in our home or wherever she/he spends most of her/his time.	(1)	(2)	(3)	(4)	(5)
54. My child receives services in settings we prefer.	(1)	(2)	(3)	(4)	(5)
55. My child's services are planned so that they fit with my family's normal schedule.	(1)	(2)	(3)	(4)	(5)
56. My child receives services in settings where children without special needs participate.	(1)	(2)	(3)	(4)	(5)
57. I know my family's rights concerning services.	(1)	(2)	(3)	(4)	(5)
	Very dissatisfied	Somewhat dissatisfied	Neutral	Somewhat satisfied	Very satisfied
58. All things considered, how satisfied or dissatisfied are you with your services in the last year?	(1)	(2)	(3)	(4)	(5)

For each question about your Service Coordinator, please FILL IN ONE circle.

In Early On, families choose a person to help them get services. This person is called a service coordinator, though sometimes he or she may be called a family advocate or a case manager. Here, we will call this person a Service Coordinator.

	Yes	No	Don't Know
59. Did your family have a Service Coordinator during the past year?	(Y)	(N)	(?)
	Please go to question 60 below.	Please go to question 64 on page 5. SKIP questions 60 through 63.	Please go to question 64 on page 5. SKIP questions 60 through 63.

	Very unwilling	Somewhat unwilling	Neither willing nor unwilling	Somewhat willing	Very willing
60. How willing or unwilling was your service coordinator:					
a) to meet and work with you as a partner?	(1)	(2)	(3)	(4)	(5)
b) to meet and work with other people important to your family?	(1)	(2)	(3)	(4)	(5)
c) to go out of his/her way to help your family?	(1)	(2)	(3)	(4)	(5)
61. How would you rate the quality of help from your service coordinator in getting the services your family needs?	Terrible	Poor	Fair	Good	Excellent
	(1)	(2)	(3)	(4)	(5)

Early On® / Part C Qualitative Compliance Information Project - Family Questionnaire 2008

Form C

(For each question, please FILL IN ONE circle)

	Much less than needed	Somewhat less than needed	Just about right	Somewhat more than needed	Much more than needed
62. Would you say the amount of contact with your service coordinator was:	(1)	(2)	(3)	(4)	(5)
	Very dissatisfied	Somewhat dissatisfied	Neutral	Somewhat satisfied	Very satisfied
63. How satisfied or dissatisfied are you with the service coordination your family has received?	(1)	(2)	(3)	(4)	(5)
	Yes	No			
64. Is English your native language?	(1)	(2)			
	Please go to question 65 below.	Please go to question 64b below.			
	Yes	No			
64b. Did you receive information in your native language?	(1)	(2)			

Now, we would like to ask you some final questions about your family.65. Please select your relationship to the child: (Please FILL IN ONE circle that best applies):

- (A) Mother (C) Grandparent (E) Other Caregiver: _____
- (B) Father (D) Other Relative

66. Please select the ethnic identity category that best describes how you identify yourself: (Please FILL IN ONE circle that best applies):

- (A) White/ Non-Hispanic White (C) Arab/ Arab-American (E) Hispanic/ Latino
- (B) African American/ Black (D) Asian/ Pacific Islander (F) Native American/ American Indian
- (G) Other: _____

67. What was your family's total income for 2007? (Please FILL IN ONE circle that best applies)

- (A) Under \$10,000 (C) \$15,000 to \$24,999 (E) \$35,000 to \$49,999 (G) \$75,000 and over
- (B) \$10,000 to \$14,999 (D) \$25,000 to \$34,999 (F) \$50,000 to \$74,999 (H) No answer

THANK YOU for taking time to fill out the *Early On* Family Questionnaire

Please return it to us in the self-addressed envelope or to:

Dr. Lyke Thompson
Wayne State University
Center for Urban Studies
656 W. Kirby, #3040 FAB
Detroit, MI 48202

APR Template – Part C (4)

Michigan
State

Appendix C

U.S. DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION
AND REHABILITATIVE SERVICES
OFFICE OF SPECIAL EDUCATION
PROGRAMS

TABLE 4
REPORT OF DISPUTE RESOLUTION UNDER PART C, OF THE
INDIVIDUALS WITH DISABILITIES EDUCATION ACT
2007-08

PAGE 1 OF 1
OMB NO.: 1820-0578
FORM EXPIRES: 11/30/2009
STATE: **MI - MICHIGAN**

SECTION A: WRITTEN, SIGNED COMPLAINTS	
(1) Written, signed complaints total	0
(1.1) Complaints with reports issued	0
(a) Reports with findings	0
(b) Reports within timelines	0
(c) Reports within extended timelines	0
(1.2) Complaints withdrawn or dismissed	0
(1.3) Complaints pending	0
(a) Complaints pending a due process hearing	0

SECTION B: MEDIATION REQUESTS	
(2) Mediation requests total	0
(2.1) Mediations	0
(a) Mediations related to due process	0
(i) Mediation agreements	0
(b) Mediations not related to due process	0
(i) Mediation agreements	0
(2.2) Mediations not held (including pending)	0

SECTION C: HEARING REQUESTS	
(3) Hearing requests total	0
(3.1) Resolution meetings (For States adopted Part B Procedures)	0
(a) Settlement agreements	0
(3.2) Hearings (fully adjudicated) (For all states)	0
(a.1) Decisions within timeline - 30 day Part C Procedures	-0
(a.2) Decisions within timeline - 30 day Part B Procedures	-0
(a.3) Decisions within timeline - 45 day Part B Procedures	0
(b) Decisions within extended timeline (only applicable if using Part B due process hearing procedures)	0
(3.3) Resolved without a hearing	0